

No.MCI-5(3)/2008-Med./**MEDICAL COUNCIL OF INDIA****EXECUTIVE COMMITTEE****13th & 14th June, 2008.**

Minutes of the meeting of the Executive Committee held on 13th & 14th June, 2008 at 11.30 A.M in the Council Office at Sector 8, Pocket 14, Dwarka, New Delhi-110 077 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, <u>Thiruvananthapuram (Kerala)</u>
Prof. P.N.Tandon	Former Prof. & Head of Neuro-Surgery,A.I.I.M.S, <u>New Delhi</u> and Member, Adhoc Committee appointed by the Hon'ble Supreme Court
Dr. (Mrs.) S. Kantha	Former Vice-Chancellor, Rajiv Gandhi University of Health Sciences, <u>Bangalore (Karnataka)</u> and Member, Adhoc Committee appointed by the Hon'ble Supreme Court
Dr. Ketan Desai	Professor & Head, Deptt. of Urology, B.J.Medical College, <u>Ahmedabad</u>
Dr. K.P. Mathur	Former Medical Superintendent, Ram Manohar Lohia Hospital, New Delhi, 77, Chitra Vihar, <u>Delhi-110092</u>
Dr. Ved Prakash Mishra	Vice Chancellor, Datta Meghe University of Medical Sciences, <u>Nagpur (Maharashtra)</u>
Dr. Mukesh Kr. Sharma	Professor of General Surgery, S.M.S. Medical College, <u>Jaipur (Rajasthan)</u>
Dr. Bhanu Prakash Dubey	Prof. & Head of Department of Forensic Medicine, Gandhi Medical College, <u>Bhopal (Madhya Pradesh)</u>
Dr. S.D. Dalvi	Prof. & Head, Department of PSM, Govt. Medical College, <u>Nanded (Maharashtra)</u>
Dr. G.K. Thakur	Professor & Head, Department of Radiodiagnosis, S.K.Medical College, <u>Muzaffarpur</u>
Dr. P.K. Das	Professor & Head of the Deptt. of General Medicine, S.C.B. Medical College, <u>Cuttack</u>

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

Secretary, MCI

Apology for absence was received from Dr. V.N. Jindal, Member, Executive Committee.

At the outset, the Secretary informed the members that an integrated approach for the development of the total computerization of the office is desirable so as to make Council not only truly a paperless office but also to ensure quick and speedy disposal of pending applications or requests for seeking the information received in the Council office. For that purpose, it was thought desirable to have a Local Area Network/Wide Area Network within the Council, based on three tier structure and appropriate application software which would also enable the public to interact with the Council dynamically. He further informed that as a part of the ongoing Platinum Jubilee Celebrations, the MCI Online System has been created and today the MCI Online System would be launched at the hands of the President (Acting) Dr. P.C. Kesavankutty Nayar. Thereupon Dr. P.C.Kesavankutty Nayar, President (Acting) of the Council launched the MCI on line system. Dr. Ketan Desai, Chairman, Platinum Jubilee Year Celebrations Committee generated the first certificate through this System. On this occasion, Dr. D.K. Sharma, Chairman, Registration & Equivalence Committee and Dr. Indrajit Ray, Chairman, PG Committee were also present as Special Invitees. All the members appreciated the endeavour of the Council.

The Secretary also informed the members that the Council office vide its letter dated 20.03.2008 had requested Dental Council of India to consider the matter with regard to conduct of simultaneous inspection of Medical/Dental Colleges.

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 of the Dental Council of India in its meeting held on 12.04.2008 had decided in this regard as under:-

"The Executive Committee accepted the proposal of MCI for conducting the Simultaneous Inspection of Medical/Dental Colleges where the organization is having a Medical College and Dental College as well.

The MCI may be requested to intimate the date of MCI inspection well in advance so that DCI can simultaneously appoint the inspection team in respect of Dental College."

1. Minutes of the Executive Committee Meeting held on 12th May, 2008 - 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 Executive Committee meeting held on 12th May, 2008.

2. Minutes of the last meeting 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 by the office on the various items included in the agenda of the Executive Committee meeting held on 12th May, 2008.

3. 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 noted that the matters dealing with policy decisions, including pending items arising out of the decisions taken by the Executive Committee, will be placed before the Executive Committee meeting to be held on 02.07.2008.

4. Sri Aurobindo Instt. of Medical Sciences, Indore - Renewal of permission for admission of 5th batch of MBBS students for the academic session 2008-2009.

Read: The Council Inspectors report (16th & 17th May, 2008) for renewal of permission for admission of 5th batch of students for the academic session 2008-2009 at Sri Aurobindo Instt. of Medical Sciences, Indore.

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 (16th & 17th May, 2008) and decided to recommend to the Central Govt. to renew the permission for admission of 5th batch of 100 (One Hundred) MBBS students at Sri Aurobindo Instt. of Medical Sciences, Indore for the academic session 2008-09.

5. Muzaffarnagar Medical College, Muzaffarnagar - Renewal of permission for admission of 3rd batch of students for the academic session 2008-09.

Read: The Council Inspectors report (20th & 21st May, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Muzaffarnagar Medical College, Muzaffarnagar.

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 & 21st May, 2008) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 (One Hundred) MBBS students at Muzaffarnagar Medical College, Muzaffarnagar for the academic session 2008-09.

6. Konaseema Institute of Medical Sciences, & Research Foundation Chaitanya Nagar - Renewal of permission for admission of 4th batch of students for the academic session 2008-2009.

Read: The Council Inspectors report (13th & 14th May, 2008) for renewal of permission for admission of 4th batch of students for the academic session 2008-2009 along with request received from the college authorities vide letter dated 04.06.2008 to sanction 100 admissions for the academic year 2008-09 at Konaseema Institute of Medical Sciences & Research Foundation, Chaitanya Nagar.

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 (13th & 14th May, 2008) along with the letter dated 04.06.2008 received from the college authorities through the Central Govt. requesting sanction for 100 admissions if deficiencies are found for 150 admissions and noted the following:-

a) The following teachers cannot be considered eligible due to the reasons mentioned below:-

S.No.	Name	Designation	Department	Remarks
1.	Dr.G. Ananth Raju	Professor	Peadiatrics	In his declaration form he has shown his experience as Assoc. Prof. with only 3 years against the requirement of 4 years as per Regulations which is inadequate. Hence, cannot be considered.
2.	Dr.M.Amarendra	Asstt.Prof.	Paediatrics	In his declaration form no experience has been shown as Resident in a recognized/permitted medical college against the requirement of 3 years as per Regulations. Hence cannot be considered.
3.	Dr.V.M. Rao	Asstt. Prof.	Medicine	In his declaration form he has shown his experience as Resident of only 1 year 9 months which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.
4.	Dr.S.Surapaneni	Asstt.Prof.	Dentistry	In his declaration form no experience has been shown as Tutor/Resident in a recognized/permitted medical college against the requirement of 3 years as per Regulations. Hence cannot be considered.

(b) In view of above, the shortage of teaching faculty is 7.60%(13 out of 171) as under:-

- i) Professor 02 (TB & CD-1, Pead.-1)
- ii) Associate Professor 08 (Physiology& Pathology 2 each, Pharmacology, TB & CD, Paediatrics & Radio diagonisis 1 each)
- iii) Assistant Professor 03 (Physiology-1, Medicine-1,Dentistry-1).

It was further observed that the deficiency of the faculty while considering for 100 admissions is less than 5% as under:-

- i) Professor 02 (TB & CD-1, Pead.-1)
- ii) Associate Professor 01 (Physiology-1)
- iii) Assistant Professor 01 (Dentistry-1)

In view of above and noting that the infrastructure, clinical material and other facilities are adequate for reduced intake of 100 students, 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 renew the permission for admission of 4th batch of 100 (One Hundred) MBBS students for the academic year 2008-09 at Konaseema Institute of Medical Sciences & Research Foundation, Chaitanya Nagar.

7. Santhiram Medical College, Nandyal - Renewal of permission for admission of 4th batch of students for the academic session 2008-09.

Read: The Council Inspectors report (23rd & 24th May, 2008) and 9th June,2008 for renewal of permission for admission of 4th batch of students for the academic session 2008-2009 at Santhiram Medical College, Nandyal.

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 reports (23rd & 24th May, 2008) and 9th June,2008 and noted the following:-

- 1. (a) In relation to certain Declaration Forms submitted on behalf of the medical teachers and endorsed by the Principal of the medical college, it was observed/found that teaching experience shown in those Declaration Forms is incorrect and in certain cases, it was seriously doubted. The office of the Council had undertaken the exercise of verifying the individual particulars regarding the claimed teaching experience from the Medical institutions concerned and found their claim to be fake. The following teaching faculty cannot be considered as the experience certificates submitted by them are forged as shown below:

S.No.	Name	Designation	Department	Remarks
1.	Dr. M.N.P. Charan Paul	Assoc. Prof.	Pathology	In his declaration form, he has claimed that he has worked at Dr. PS Instt. of Medical Sciences, Chinoutpalli from 03.04.2003 to 19.12.2006 as Asstt.Prof. in the department of Pathology. On verification, the Principal of Dr. PS Instt. of Medical Sciences, Chinoutpalli vide its letter dt. 16.5.2008 has informed that he has not worked as Asstt. Prof. in the department of Pathology at their institute. Thus, he has submitted a false and forged experience certificate and therefore cannot be accepted as a teacher.

(b) The following teachers have been found to be working at more than one medical college simultaneously:-

1. Dr. Mohammed Abdul Mushtaq Pasha, Professor, Community Medicine:

Name of the college	Date of Joining	Date of Inspection
1. Bhaskar Medical College, Hyderabad	21.12.2006	11.05.2007
2. Santhiram Medical College, Nandyal	21.12.2006	23.05.2008

(c) (I) In view of above, the shortage of teaching faculty on the day of inspection is 43.8% (i.e. 53 out of 121) as under:-

- (i) Professor :08 (Anatomy -1, Biochemistry -1, Community Medicine -1, Paediatrics -1, ENT -1, Ophthalmology -1, Obst. & Gynae. -1 & Anaesthesia -1)
- (ii) Associate Prof. :18 (Anatomy -1, Physiology -2, Pharmacology -1, Pathology -2, Forensic Medicine -1, General Medicine -2, Paediatrics -1, TB & Chest -1, Dermatology -1, General Surgery -2, Orthopaedics-1, Anaesthesia-1, Radio-Diagnosis -1, & Dentistry -1)
- (iii) Assistant Prof. :19 (Anatomy -2, Physiology -1, Bio-Physics -1, Pharmacology -2, Pathology -3, Community Medicine -3, General Medicine -1, Paediatrics -2, TB & Chest -1, General Surgery -1 & Orthopaedics -2)
- (iv) Tutor :08 (Anatomy -1, Pathology -5 & Community Medicine -2)

(II) The shortage of Residents on the day of inspection is 64.7% (i.e. 55 out of 85) as under :-

- (i) Sr. Resident :14 (General Medicine -3, Paediatrics -1, TB & Chest -1, General Surgery -2, Obst. & Gynae. -1, Anaesthesia -4 & Radiology -2)
- (ii) Jr. Resident :41 (General Medicine -12, Paediatrics -6, TB & Chest -2, Dermatology -3, Psychiatry -2, General Surgery -6, Orthopaedics -1, Ophthalmology -3 & Obst. & Gynea. -6)

(d) A complaint was received in the office of the Council regarding showing the faculty with false documents and false & cooked up record of clinical material. On verification, discrepancies have been observed in the declaration forms of the following teachers:-

S.No.	Name	Designation	Department	Remarks
1.	Dr. Chandrahas Chatterjee	Assistant Professor	Pathology	The photographs and signatures in the declaration forms for the year 2007-08 and 2008-09 are different.
2.	Dr. R. Arumugam	Associate Professor	Physiology	The photograph and signature on the declaration form of 2008-09 are different than those on the declaration forms of previous 2 years.
3.	Dr. K. Ramachandra	Professor	Obst. & Gynae.	The photograph and signature on the declaration form of 2008-09 are different than those on the declaration forms of previous 2 years.

2. The clinical material is grossly inadequate as under:-:-

	Day of Inspection
O.P.D. attendance	600
Casualty attendance	08
Bed occupancy%	30%

Operative work	
Number of major surgical operations	3
Number of minor surgical operations	4
Number of normal deliveries	1
Number of caesarian Sections	-
Radiological Investigations	
X-Ray	50
Ultrasonography	30
Special Investigations	-
C.T. Scan	2
Laboratory Investigations	
Biochemistry	180
Microbiology	15
Serology	20
Parasitology	02
Haematology	195
Histopathology	02
Cytopathology	02

3. The 3 persons named (i) Sh. S. Venkata Krishnanaik (ii) Sh. I.S. Chaitanya Kumar (iii) Sh. D. Bala Chandra Reddy were presented as Jr. Residents in Ophthalmology with their zerox Photographs on their declaration forms were found to be non-MBBS, impersonating as doctors. The matter was immediately taken up to the Principal (Acting) who was available and the Chairman of the institution for initiating appropriate legal action against these 3 persons under intimation to Medical Council of India. The Principal incharge has given a letter addressed to the Secretary, Medical Council of India in which he has admitted that they have presented 3 non-medico’s as doctors and tendered apologies.
4. The Principal of the institution was also not available on the day of inspection, he was said to be on leave for pilgrimage.
5. Other deficiencies as pointed out in the inspection report.

In view of above and Govt. of India letter dt. 15/3/2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, 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 Central Govt. not to renew the permission for admission of 4th batch of MBBS students for the academic session 2008-2009 at Santhiram Medical College, Nandyal.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council were, therefore, clearly of the view that the Council should take steps for referring these cases to the Police authorities for registration of FIRs and conducting investigations in all such cases. It was observed that in the complaint to be sent to the Police authorities, it should also be clearly requested that all those cases where there is a collusion and conspiracy of such persons with the management of the colleges, the necessary action should also be taken against the management of those colleges. It was further decided that appropriate action be taken against these Doctors and the Principal of the college in accordance with Professional Conduct (Etiquette and Ethics) Regulations, 2002.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council also decided that including recommendation for not renewing the permission for admission of 4th batch for 100 admissions in the college, the Central Government may consider debarring this college from any further consideration u/s 10A of the Act for a period of 2-3 years and for any further appropriate action by the Central Government to curb the menace of submitting false declaration forms.

Office Note: It was further decided to call the Dean of the college immediately to present before the Secretary for explaining how the different declaration forms of the above mentioned 3 teachers for different academic years have been submitted having different photographs and signatures on the forms.

8. Sree Uthradom Thirunal Academy of Medical Sciences, Trivandrum – Renewal of permission for admission of 3rd batch of students for the academic session 2008-09.

Read: The compliance verification inspection report (22nd May, 2008) along with the Council Inspectors report (9th & 10th May, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Sree Uthradom Thirunal Academy of Medical Sciences, Trivandrum.

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 (22nd May, 2008) along with the Council Inspectors report (9th & 10th May, 2008) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 (One Hundred) MBBS students at Sree Uthradom Thirunal Academy of Medical Sciences, Trivandrum for the academic session 2008-09.

9. Karuna Medical College, Palakkad - Renewal of permission for admission of 3rd batch of students for the academic session 2008-2009.

Read: The Council Inspectors report (27th & 28th May, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Karuna Medical College, Palakkad.

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 May, 2008) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 (One Hundred) MBBS students at Karuna Medical College, Palakkad for the academic session 2008-09.

10. Establishment of new medical college at Kalahandi, Orissa in the name of Sardar Rajas Medical College, Hospital & Research Centre, Kalahandi by Salvam Educational & Charitable Trust.

Read: The Council Inspectors report (16th & 17th May, 2008) for grant of Letter of Permission for establishment of new medical college at Kalahandi, Orissa in the name of Sardar Rajas Medical College, Hospital & Research Centre, Kalahandi by Salvam Educational & Charitable Trust.

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 (16th & 17th May, 2008) and noted the following:-

1. Shortage :

- (a) The shortage of teaching faculty is 96.36% (53 out of 55)

Faculty	Number	Department
i) Professor	5	Anatomy 1, Physiology 1, Biochem. 1, Gen. Med. 1, Gen. Surg. 1,
ii) Associate Professor	13	Anatomy 2, Physiology 2, Biochem. 1, Pharmacology 1, Pathology 1, Microbiology 1, Paediatrics 1, Orthopaedics 1, OBGY 1, Anaesthesia 1, Radiodiagnosis 1,
iii) Assistant Professor	20	Anatomy 3, Physiology 3, Biochem. 1, Pathology 1, For. Med. 1, Comm. Med. 1, Gen. Med. 1, Gen. Surg. 3, ENT 1, Ophthalmology 1, OBGY 1, Anaesthesia 1, Radiodiagnosis 1, Dentistry 1.
iv) Tutor	15	Anatomy 4, Physiology 4, Biochem. 2, Pharmacology 1, Pathology 1, Microbiology 1, For. Med. 1, Comm. Med. 1,

(b) The shortage of Residents is 97.61% (41 out of 42) as under :-

i) Sr. Resident	18	Gen. Med. 4, Paediatrics 1, Gen. Surg. 4, Orthopedics 1, ENT 1, Opthomology 1, OBGY 2, Anaesthesia 2, Radiodiagnosis 2
ii) Jr. Resident	23	Gen. Med. 7, Paediatric 2, Gen. Surg. 8, Orthopedics 2, ENT 1, Ophthalmology 1, OBGY 2,

2. Clinical Material is grossly inadequate as under:-

	Daily Average		Day of Inspection	
O.P.D. attendance	10-12		13	
Casualty attendance	Nil		Nil	
Number of admissions / discharge	1-2		Nil	
Bed occupancy%	2		Nil	
Operative work				
Number of major surgical operations	Nil		Nil	
Number of minor surgical operations	14 in 3 months		Nil	
Number of normal deliveries	Nil after 9.10.2007		Nil	
Number of caesarian Sections	Nil after 9.10.2007		Nil	
<u>Radiological Investigations</u>	O.P.	I.P.	O.P.	I.P.
X-ray	1	-	1	-
Ultrasonography	-	-	-	-
Special Investigations	-	-	-	-
CT Scan	-	-	-	-
<u>Laboratory Investigations</u>				
Biochemistry	2-3	-	2	-
Microbiology	-	-	-	-
Serology	-	-	-	-
Parasitology	-	-	-	-
Haematology	4-5	-	3	-
Histopathology	-	-	-	-
Cytopathology	-	-	-	-

- Clinical material is grossly inadequate in terms of OPD attendance, Casualty attendance, number of admission/discharges and bed occupancy.
- Casualty is non functional as there are no specialized equipments available.
- There is no ICU available.
- Radiological investigations are grossly inadequate. Only one mobile x-ray unit is available. There is no Radiologist available in the department.
- Laboratory investigation are grossly inadequate.
- Only routine Biochemistry and Haematology investigations are carried out in a small room adjacent to non functional Obstetric ward. There is no provision for conducting Microbiology investigations. There is no consultant available for reporting the Lab investigations.
- There is no faculty/residents in the Obst. & Gynae. department. Few deliveries in the hospital before 9th October, 2007 were conducted by private practitioners.

3. Distribution of beds is grossly inadequate as under:-

Speciality	Required Beds/Units	Present Beds/Units	Deficiency (if any)
Medicine & Allied Specialities	80	60	Deficiency of 20

General Medicine	30	20*	beds in General Medicine & 10 beds in Paediatrics.
Paediatrics	-		
TB & Chest	-		
Skin & VD	-		
Psychiatry	110	80	
Total			
Surgery & Allied Specialities	90	-	Deficiency of 140 beds in Surgery and Allied Specialities
General Surgery	30	-	
Orthopaedics	10	-	
Ophthalmology	10	-	
ENT			
	140	Nil	
Total			
Obstetrics & Gynaecology	30	-	Deficiency of 50 beds in Obstetrics & Gynaecology.
Obstetrics & ANC	20	-	
Gynaecology	50	Nil	
Total			
Grand Total	300	80	220

- * 20 Paediatrics beds have been placed in two corridors.
- * There is deficiency of 220 teaching beds required at the inception.

- 4. Medical Superintendent is not available.
- 5. No annual budget is available for hospital/college.
- 6. Medical Education Unit is not available
- 7. Statistical Unit is not available
- 8. Buildings: The Medical College occupies a G + 2 storied building (still under construction). The hospital is located in a separate G+ 2 storied building (under construction). Total construction of OPD Block is complete, however, Partitioning of different OPD is yet to be done.
- 9. Lecture theatres:

	College	Hospital
Number	Two *	---
Type	Gallery	---
Capacity	100	---
A.V.Aids	Not available	---

- * Both the lecture theaters in the college are under construction.
- 10. Common room for boys and girls are not available
- 11. Animal House is not available
- 12. Central Library is under construction
- 13. Central photography cum audio-visual units are not available
- 14. Workshop is not available
- 15. Hostels are not available
- 16. Residential Quarters are not available
- 17. Sports and recreation facilities are not available

18. Teaching & Other facilities: In OPD Teaching facilities like patient couch, stools, x-ray, view box, examination tray, etc. are not provided in each room. Each speciality is not provided teaching area. There is no separate injection room for male and female, no dressing room, no plaster room, no plaster cutting room, no E.C.G. room, no central clinical laboratory, no audiometry room, no immunization room, no family welfare clinic, no dark room refraction room, Minor OT is available which is also used as labour room.

Wards are not provided with duty doctor room, nurse duty room, nursing station, pantry, examination / procedure room, teaching area and side laboratory. Total nil clinical demonstration areas have been provided in the wards. There is no seminar hall in the major departments.

19. Registration and Medical Record Section: There is a separate registration counter for O.P.D. cases in O.P.D. It is not computerized. There is 1 clerk. Indoor registration counter is not available. There is no medical record department. Follow up service is not available.
20. Central Casualty Service is not available. 20 beds have been placed in a ward with no facility/equipment available for casualty services. No doctor/nursing staff is available in the casualty.
21. Clinical Laboratories: Central clinical laboratory not available. Only routine Biochemistry & Haematology investigations are carried out in a small room adjacent to non functional Obstetric ward. There is no provision for conducting Micro biology investigations. There is no consultant available for reporting the Lab investigations.
22. Operation theatre unit is not available.
23. Intensive care areas are not available.
24. Labour room is not available. The Minor OT was being used to conduct normal deliveries. Last normal delivery was conducted on 09/10/07. There is no Obst. & Gynae. department available in the hospital.
25. Radiological facilities: Only one mobile X-Ray unit of 100mA is available in the Radiology Dept. Facilities for special investigations are not available. Protective measures as per BARC specification are not provided. No medical staff is available for reporting.
26. Pharmacy: The staff consists of 1 pharmacist. There are no sub-stores located in different parts of hospital. On an average daily 10-15 outdoor patients are given drugs.
27. Central sterilization department is not available.
28. Intercom is not available.
29. Central laundry is not available.
30. Kitchen is not available.
31. Canteen is not available.
32. Incinerator is not available. Hospital waste is buried in the pits.
33. Para medical staff is grossly inadequate as under:-

Laboratory Technicians: 5
 Laboratory Assistants: 3
 Laboratory Attendants: 2

34. Nursing Staff is grossly inadequate as under:

Nursing Superintendent	:	Nil
Deputy Nursing Superintendent	:	Nil
Matron	:	Nil
Asstt. Nursing Superintendent	:	Nil
Nursing Sisters	:	3
Staff nurses	:	3

35. Blood Bank is not available.

36. The teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine are not established and are non-functional.

37. Other deficiencies as pointed out in the inspection report.

In view of above, whereby it has been found that the applicant has failed to fulfill the mandatory and statutory precondition at Sr. No. 2(5) of the qualifying criteria of owning & managing of a functional hospital of not less than 300 beds, laid down in the Establishment of Medical College Regulations, 1999 and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Kalahandi, Orissa in the name of Sardar Rajas Medical College, Hospital & Research Centre, Kalahandi by Salvam Educational & Charitable Trust 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 of 300 beds having adequate clinical material when on inspection it has been found that the hospital was not functional and further decided to direct the institute to submit revised Essentiality Certificate in the format prescribed in the Regulations.

11. Establishment of a new medical college at Poonambi, Vellarade, Trivandrum by Ruckmoni Memorial Charitable Educational Health Trust.

Read: The Council Inspectors report (16th & 17th May, 2008) for grant of Letter of Permission for establishment of new medical college at Poonambi, Vellarade, Trivandrum by Ruckmoni Memorial Charitable Educational Health Trust.

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 (16th & 17th May, 2008) and noted the following:-

1. a) The following teachers cannot be considered eligible due to the reasons mentioned below:-

Sl.No	Name	Designation	Department	Reason
1	Dr. Vimala V.S	Sr.Resident	OBGY	Does not have the requisite 3 years Jr. Residency experience. Not counted.
2	Dr.Y . William	Asst. Professor	PSM	He is DPH. Does not have the prescribed qualifications for the post of Asst. Prof. Not counted
3	Dr.Rama Subbu	Sr.Resident	Surgery	He is teaching in Rajas Dental College as certified by him. Not counted.

4	K.Mohan Kumar	Sr.Resident	ENT	DA.Does not have the requisite Jr.Residency experience. Not counted.
5	Dr.S KumaraVelu	Sr.Resident	Anesthesia	Does not have the requisite Jr.Residency experience. Not counted.
6	Dr.Vimala Elangovan	Assoc.Prof.	OBGY	No retirement order and no experience certificate enclosed. No entry in the declaration form. Not counted.
7	Dr.K.G Ananthan Thampi	Assoc.Prof	Surgery	No relieving order. Does not have the requisite five years experience as Asst.Prof. Not counted.
8	Dr.Ilaya Salvan	Assoc.Prof	Orthopaedics	Does not have the requisite five years experience as Asst.Prof. Not counted.

(b) In view of the above, the shortage of teaching faculty is 69% (i.e. 38 out of 55) as under:-

- i) Professor : 3 (Anatomy-1,Physiology-1,Gen.Surg.-1)
- ii) Associate Professor : 9(Anatomy-2,Physiology-2,Pathology-1, Microbiology-1,Paediatrics-1,Orthopaedics-1, Radio Diagnosis-1)
- iii) Assistant Professor : 17(Anatomy-3,Physiology-1,FMT-1,PSM-1, Gen.Med-2,Gen Surg-3, ENT-1, Ophthalmology-1, OBGY-1,Anaesthesiology-1, RadioDiag.-1, Dentistry-1)
- iv) Tutor : 9 (Anatomy-1,Physiology-2,Biochem.-2, Pharmacology-1,Microbiology-1,FMT-1,PSM-1)

© The shortage of Residents is 59.5% (i.e. 25 out 42) as under :-

- i) Sr. Resident : 13(Gen.Med-4,Paediatrics-1,GenSurg.-2,Ortho-1, OBGY-2,Radiodiagnosis-2,Opthal-1)
- ii) Jr. Resident : 12(Gen.Med.-3, Paediatrics-2, Gen Surg-3, Ortho-2, Anaesthesia-2)

2. Clinical Material is inadequate as under:-

	Daily Average	Day of Inspection
O.P.D. attendance	-	15
Casualty attendance	-	3
Number of admissions / discharge	-	-
Bed occupancy%	-	-
Operative work	-	-
Number of major surgical operations	-	-
Number of minor surgical operations	-	-
Number of normal deliveries	-	-
Number of caesarian Sections		
<u>Radiological Investigations</u>		

X-ray	-	-
Ultrasonography	-	-
Special Investigations	-	-
C.T. Scan		
<u>Laboratory Investigations</u>		
Biochemistry	-	-
Microbiology	-	-
Serology	-	-
Parasitology	-	-
Haematology	-	-
Histopathology	-	-
Cytopathology	-	-
Others		

- The hospital was found to be non-functional on the day of inspection.
 - No records were available in respect of OPD, Operative workload, Radiological and Laboratory Investigations. Therefore, the clinical material could not be computed.
 - There were only 15 to 20 patients in the OPD and 3 in the casualty on both the days of inspection.
 - OT and Anaesthesia registers were not available. No delivery records were available.
 - Some people were made to lie down in the wards which the Dean agreed were not patients.
 - There was no equipment in the central lab., which is yet to be made functional. However, there was a Biochemistry lab, which had no records.
 - Radiology Department had 4 x-rays but no numbers/names on the x-ray plates.
3. Common room for boys and girls are not available.
 4. Animal House is not available
 5. Central Library is not available. There are no books or journals. The staff has not yet been appointed for the library.
 6. Central photography cum audio-visual units are not yet established.
 7. Workshop is not yet established.
 8. Hostels: There are no hostels within the campus. Five triple seated rooms have been earmarked for girls hostel on the sixth floor of the college and hospital building. They are not furnished. There is no hostel for boys.
 9. Residential Quarters are not available.
 10. Sports and recreation facilities are not available.
 11. OPD is not yet functional. There are total 15 to 20 patients on the day of inspection. There are registration counter but not functional. There is no teaching area in any of the OPD's. There is no injection room for male and female, dressing room, plaster room, plaster cutting room and E.C.G. room. Central clinical laboratory, is not yet equipped and functional. There is no audiometry room, immunization room, family welfare clinic, dark room refraction room, minor O.T. etc.
 12. In Wards : There is no doctor's duty room, nurse's duty room, nursing station, pantry, examination / procedure room, teaching area and side laboratory. No clinical demonstration areas have been provided in the wards. There is no seminar hall in the major departments.
 13. Registration and Medical Record Section is not computerized. There is no Indoor registration counter. There is no staff. ICD X Classification of diseases is not followed for indexing. Follow up service is not available.

14. Central Casualty Service: Central oxygen supply, central suction is not available. There is 1 defibrillator, 1 pulse oximeter, 1 ambu bag, and 1 disaster trolley. Casualty OT is used for major surgery. There is one other minor OT, which is not equipped
15. Clinical Laboratories are not yet equipped and functional.
16. Operation theatre unit has no central oxygen and nitrous oxide supply. It was not found to be functional. No record of surgeries was available. There was no Anaesthesia register. TV with camera attachment is not available. Resuscitation and monitoring equipment is not available. There is no post-operative ward or recovery room. O.T. facilities are not as per Council norms for the present stage.
17. There are no Intensive Care areas. Space is earmarked for Paediatric and Neonatal ICU. No equipment has been provided. Facilities and equipment in ICUs are not available.
18. There is no septic labour room or eclampsia room.
19. In Radiological Department, No protective measures as per BARC specification are provided. The Radiology Department was found to be non – functional. 4 x-rays were available without any number or name of the patient. Lead number for x-ray plates were not available.
20. Pharmacy: The staff consists of 2 pharmacists. There are no sub-stores located in different parts of hospital. On an average daily 10 to 15 patients are given drugs.
21. Central sterilization department is not yet functional. EPABX is not available.
22. Central laundry is not available
23. Kitchen is LPG type. Service of dietician is not available.
24. Incinerator is not available. There is no provision for disposal of bio-medical waste.
25. The teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine are not yet established and are non functional as per Council norms. Details of which are as under:-

ANATOMY -Only space is earmarked for Lecture theaters which are not furnished. They are not provided with A.V. Aids. There are 2 partitioned demonstration rooms which are not furnished. Departmental library cum seminar room is earmarked, not yet furnished. Dissection hall has 12 big dissection tables. No washing facilities are provided. There are no storage tanks. There are no cadavers. There is no cooling cabinet. There is no embalming room. No student lockers are provided. Space is earmarked for Histology Practical laboratory. There is no research laboratory. Museum is available. It has 30 mounted specimens, 25 models, 4 bone sets and 2 articulated Skeletons. MRI, CT and X-rays are not displayed. No catalogues are available.

PHYSIOLOGY - Only space is earmarked for Lecture theaters which are not furnished. They are not provided with A.V. Aids. There is 1 partitioned demonstration room which is not furnished. There is Amphibian experimental physiology laboratory, Mammalian experimental laboratory, Haematology laboratory and Clinical Physiology laboratory. Each laboratory has 18 workplaces. There are no preparation rooms. Departmental library cum seminar room has been earmarked. There is no research laboratory provided.

BIOCHEMISTRY - Only space is earmarked for Lecture theaters which are not furnished. They are not provided with A.V. Aids. There is 1 partitioned demonstration room which is not furnished. The practical laboratory has 18 workplaces. However, the gas cylinders are not available. It has no preparation room. The Departmental library cum seminar room has been earmarked. There is no research laboratory. The department does not participate in hospital work and is not posted to central clinical laboratory in rotation.

26. Other deficiencies as pointed out in the inspection report.

In view of above, whereby it has been found that the applicant has failed to fulfill the mandatory and statutory precondition at Sr. No. 2(5) of the qualifying criteria of owning & managing of a functional hospital of not less than 300 beds, laid down in the Establishment of Medical College Regulations, 1999 and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 the scheme received u/s 10A of the I.M.C. Act, 1956 for establishment of new medical college for establishment of new medical college at Poonambi, Vellarade, Trivandrum by Ruckmoni Memorial Charitable Educational Health Trust.

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 Kerala requesting to intimate as to how they have issued the Essentiality Certificate certifying that the applicant owned and managed a functional hospital of 300 beds having adequate clinical material when on inspection it has been found that the hospital was not functional and further decided to direct the institute to submit revised Essentiality Certificate in the format prescribed in the Regulations.

12. Establishment of a new medical college at Moradabad, U.P. by Teerthanker Mahavir Institute of Management & Technology (Society), Moradabad, U.P

Read: The Council Inspectors report (13th & 14th May, 2008) for grant of Letter of Permission for establishment of new medical college at Moradabad, U.P. by Teerthanker Mahavir Institute of Management & Technology (Society), Moradabad, U.P along with letter dated 01.05.2008 from the college authorities through the Central Govt. requesting to consider the proposal for 100 admissions.

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 (13th & 14th May, 2008) along with letter dated 01.05.2008 from the college authorities through the Central Govt. requesting to consider the proposal for 100 admissions and decided to recommend to the Central Govt. to issue Letter of Permission for establishment of new medical college at Moradabad, U.P. by Teerthanker Mahavir Institute of Management & Technology (Society), Moradabad, U.P with an annual intake of 100 (Hundred) MBBS students for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

13. Establishment of a new medical college at Kollam, Kerala by Podikunjun Musalirar Memorial chartable and Educational Trust, Kollam, Kerala.

Read: The Council Inspectors report (13th & 14th May, 2008) for grant of Letter of Permission for establishment of new medical college at Kollam, Kerala by Podikunjun Musalirar Memorial Charitable and Educational Trust, Kollam, Kerala.

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 (13th & 14th May, 2008) and noted the following:-

1. a) The following teachers cannot be considered eligible due to the reasons mentioned below:-

Sr No.	Name	Designation	Department	Reason
1	Dr. Leelavathy. N.	Assoc.Prof.	Anatomy	Does not have the requisite 5yrs experience as Asst. Prof. Hence not accepted.

2	Dr T.M. Chay	Asst. Prof.	Biochemistry	M. Sc. Science faculty. Hence not accepted.
3	Dr. Meena Vijayraghavan	Prof.	Anesthesia	Her voluntary retirement has not been accepted by the govt. Matter is sub- judice. Not counted

(b) In view of the above, the shortage of teaching faculty is 9% (i.e 5 out of 55) as under:-

- i) Professor : 1 (General Medicine- 1)
- ii) Associate Professor : 2 (Radio Diagnosis-1, Anaesthesia-1)
- iii) Assistant Professor : 2 (Biochemistry- 1, PSM-1)
- iv) Tutor : Nil.

© The shortage of Residents is 7% (i.e. 3 out 42) as under :-

- i) Sr. Resident : 3 (Gen. Med-1, Gen. Surg-1, Radio-Diagnosis-1)
- ii) Jr. Resident : Nil.

2. Clinical Material is inadequate as under:-

	Daily Average	Day of Inspection
Bed occupancy%	70%	60%
Number of normal deliveries	1	-
Number of caesarian Sections	0-1	-

- The bed occupancy was 60% on the day of the inspection.
- There is negligible workload in the OBGY Department on the day of inspection. There were only 5-6 patients in the OPD. No delivery was conducted. There was only 30% bed occupancy in the OBGY wards.

3. The land use conversion to NA is not available.

4. Girls' hostel is not furnished. Mess is not available in boys & girls' hostels.

5. Residents' hostel is not furnished.

6. Nurses' hostel is not furnished.

7. Residential quarters for teaching faculty in the campus are under construction.

8. Audiometry room is sound proof but not air-conditioned.

9. In Anatomy department, lockers for students are not available.

10. Central laundry- There is no central laundry. Space is earmarked for Central Laundry. Equipment has been purchased but has not yet been installed. Presently, laundry is outsourced.

11. Other deficiencies as pointed out in the inspection report.

In view of above and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Kollam, Kerala by Podikunjun Musaliar Memorial Charitable and Educational Trust, Kollam, Kerala u/s 10A of the I.M.C. Act, 1956.

14. Establishment of a new medical college at Barabanki, Uttar Pradesh by Hind Charitable Trust, Lucknow, Uttar Pradesh.

Read: The compliance verification inspection report (13th May, 2008 and 12th June, 2008) along with Council Inspectors report (4th & 5th April, 2008) for establishment of new medical college at Barabanki, Uttar Pradesh by Hind Charitable Trust, Lucknow, Uttar Pradesh.

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 (13th May, 2008 and 12.06.2008) along with Council Inspectors report (4th & 5th April, 2008) and noted the following:-

1. Shortage :

(a) The shortage of teaching faculty is: 43 / 55 (78.18 %)

Professor	4	Anatomy-1, Physiology-1, Bio-chem-1, Surgery-1
Associate Professors	11	Anat-2, Physio-2, Bio-chem-1, Patho-1, Micro-1, Pedia-1, Ortho-1, Radio-1, Anaesthe-1
Assistant Professors	14	Anato-3, Physio-3, Bio-chem-1, Forensic-1, Commu. Medi-1, ENT-1, Opth-1, OBG-1, Anaesthe-1, Dentistry-1
Tutors	14	Anato-4, Physio-4, Bio-chem-1, Patho-1, Micro-1, Pharmac-1, Forensic-1, Commu. Medi-1

(b) The shortage of Residents is : 33 / 42 (78.50 %)

Sr. Residents	13	Med-3, Surg-2, Ortho-1, ENT-1, Opth-1, OBG-1, Anaesthesia-2, Radio-2
Jr. Residents	20	Med-7, Ped-1, Surg-8, Ortho-2, ENT-1, OBG-1

© Principal has certified that ' No faculty members / Residents are available' in the Departments of Anatomy, Physiology, Microbiology, Forensic Medicine, Community Medicine, ENT, Anesthesia and Dentistry on the day of Inspection at the time of verification of Faculty.

2. Available Clinical Material is as under:

	Day of Inspection 12-6-2008 up to 1 PM
O.P.D. attendance	130
Casualty attendance	01
No. of Admi/Discharge	00/01
Bed occupancy%	07
Operative work	00
Number of major surgical operations	00
Number of minor surgical operations	00
Number of normal deliveries	00
Number of caesarian Sections	
<u>Radiological Investigations</u>	
X-ray	20
Ultrasonography	15
Special Investigations	01
C.T. Scan	00
<u>Laboratory Investigations</u>	
Biochemistry	10
Microbiology	10
Serology	2
Parasitology	nil
Haematology	nil

Histopathology	nil
Cytopathology	nil
Others	nil

Bed Occupancy : 21/300 (07 %)

Note: The figures as available from the Records maintained in the registers were found to be highly inflated on actual verification.

- Only one case was operated in the last four days.
- The total number of patients admitted in the entire hospital is only 21.
- On inspection of registers in the OT it was noted that the names of the patients entered by the anesthetist and those entered by the surgeon were entirely different. It was also noted that none of the patients who have been apparently operated have been admitted in any of the ward. The acting HOD of Surgery informed that only one case has been done in last six days whereas the OT register mentions that 15 cases were operated yesterday and another 14 on the day before.
- The actual number of the patients attending OPD are about 120-130 only and the number of investigation being done are much less than shown in the record.
- At 10-30 AM it was found that there were no doctors available in the OPD.
- Out of 20 people standing in the queue for the OPD registration, it was found that 14 persons were employees of the Institution.
- The OPD registration counter were not able to show any records for the number of patients attending OPD as they said that the computer was not responding.
- The in-patients record showed an occupancy of 259 patients at 11 AM whereas on actual verification there were only 7 patients admitted in the hospital.
- Despite asking for the detailed in-patients list of the admitted patients, the hospital did not provide the said information inspite of three reminders.

- (b) **Distribution of beds:** Even though the number of beds as per count is 300 , most of the beds in the wards were non functional as they were placed in totally unfurnished wards, were without any mattresses and were locked. There were only 21 in -patients in the entire wards.

In view of above and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Barabanki, Uttar Pradesh by Hind Charitable Trust, Lucknow, Uttar Pradesh u/s 10A of the I.M.C. Act,1956.

15. Establishment of new medical college at Azamgarh, U.P. by All India Children Care & Educational Development Society.

Read: The compliance verification inspection report (30th May, 2008) along with Council Inspectors report 22nd & 23rd April,2008 for grant of Letter of Permission for establishment of new medical college at Azamgarh, U.P. by All India Children Care & Educational Development Society.

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 (30th May,2008) along with Council Inspectors report 22nd & 23rd April,2008 and noted the following:-

1. (a) The following teachers have been found to be working at more than one medical simultaneously:-

Dr. Sajjan Lal Varma, Associate Professor, Physiology:

Name of the college	Date of Joining	Date of Inspection
1. Instt. of Medical Sciences & SUM Hospital, Bhubaneswar	21.03.2007	25.03.2008
2. Children Instt. of Medical Sciences & Technology, Azamgarh	03.03.2008	30.05.2008

(b) (I) In view of above, the shortage of teaching faculty is 33.33% (18 out of 54) as under:-

- i) Professor -2 (1 Physiology, 1 Surgery)
- ii) Associate Professor -6 (2 Anatomy, 1 Physiology, 1 Biochemistry, 1 Pathology, 1 Microbiology)
- iii) Assistant Professor -10 (2 Anatomy, 2 Physiology, 1 Lect. (Bio), 1 Biochemistry, 1 PSM, 1 Medicine, 1 Orthopaedics, 1 Radiodiagnosis)
- iv) Tutor : Nil

(II) The shortage of Residents is 16.66% (shortage of 7 out of 42) as under:-

- i) Sr. Resident 7 (2 Medicine, 4 Surgery, 1 Orthopaedic)
- ii) Jr. Resident Nil

2. Clinical material is inadequate in terms of casualty attendance, bed occupancy and number of deliveries on the day of inspection as under:-

	Daily Average	Day of Inspection
Casualty attendance	42	2
Bed occupancy%	83%	69%
Number of normal deliveries	1	--
Number of caesarian Sections	1	--

- 3. Side laboratories are still not available in the wards.
- 4. Resident's accommodation is available for 44 residents against the requirement of 74 as per regulations.
- 5. Resuscitation equipment in the Intensive Care area is inadequate.
- 6. Mobile X-ray unit is non functional
- 7. In CSSD – only one Horizontal and 2 Vertical sterilizers are available which is not as per MCI norms.
- 8. Other deficiencies as pointed out in the inspection report.

In view of above and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Azamgarh, U.P. by All India Children Care & Educational Development Society u/s 10A of the I.M.C. Act, 1956.

16. Dr. D.Y. Patil Medical College, Navi Mumbai – Renewal of permission for admission of 3rd batch of students against increased intake i.e. from 100 to 150 for the academic session 2008-09.

Read: The compliance verification inspection report (13th May, 2008) along with Council Inspectors report 19th & 20th March, 2008 for renewal of permission for admission of 3rd batch of students against increased intake i.e. from 100 to 150 for the academic session 2008-09 at Dr. D.Y. Patil Medical College, Navi Mumbai.

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 (13th May, 2008) along with Council Inspectors report 19th & 20th March, 2008 and noted the following:-

1. Shortage

(a) Shortage of teaching faculty is 7.84% as under:-

i)	Professor – 1	Radiology-1
ii)	Associate Professor – 5	Anatomy-2, Forensic Medicine-1, Anaesthesia-1, Microbiology-1
iii)	Assistant Professor – 9	Anatomy-1, Pathology-2, Lecturer in Epidemiology-1, Surgery-3, ANMO-1, MWO-1
iv)	Tutor - 1	Forensic Medicine -1

(b) Shortage of Residents is 21.36% as under:-

i)	Sr. Resident-11	Medicine-3, Anaesthesia-3, Orthopaedic-2, Surgery-3
ii)	Jr. Resident-14	Medicine-4, Psychiatry-2, Surgery-6, Orthopaedic-1, Ophthalmology-1

- As per the record given by the Dean, the average bed occupancy was 82% on the day of inspection. However, on verification of the bed occupancy at 3.30 p.m. by inspectors in presence of Medical Superintendent the bed occupancy found to be only 55.7% which is grossly inadequate. In addition to this quite a number of cases were of little or no clinical importance.
- Renovation work in C & D blocks in girls' hostel is still in progress and to that extent the deficiency remains as it is. Areas earmarked as visitor's room, warden's room, recreation room and dining hall in these two blocks are very small and not having adequate furniture and other facilities.
- In Radio-Diagnosis department only 3 static units are available which is inadequate. The deficiency remains as it is.
- Other deficiencies as pointed out in the inspection report.

In view of above and Govt. of India letter dt. 15/3/2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council decided to recommend to Central Govt. not to renew the permission for admission of 3rd batch of MBBS students against the increased intake i.e. from 100 to 150 for the academic session 2008-2009 at Dr. D.Y. Patil Medical College, Navi Mumbai.

17. Increase of MBBS seats from 60 to 100 at Katihar Medical College, Katihar.

Read: The Council Inspectors report (22nd & 23rd May, 2008) for grant of letter of permission for Increase of MBBS seats from 60 to 100 at Katihar Medical College, Katihar.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the Council Inspectors report (22nd & 23rd May, 2008) and noted the following:-

1. (A) The following faculty was not counted while computing faculty deficiency for reasons given as under:

S. No	Name of faculty	Designation	Department	Reason for not counting
1	Dr. SK Sinha	Assoc. Prof	Anatomy	His dental college experience of 2 yrs and 4 months has not been counted. Does not have the requisite 5 yrs experience as Asst Prof. Counted as Asst. Prof.
2	Dr. P Banerjee	Assoc. Prof	Anatomy	His dental college experience of 9 months has not been counted. Does not have the requisite 5 yrs experience as Asst Prof. Counted as Asst. Prof.
3	Mr. Krishna G	Lecturer	Anatomy	Does not have 3 yrs tutor experience after M. Sc. Counted as Tutor.
4	Dr. H Dutta	Professor	Biochemistry	M.Sc. & Ph. D Science faculty. Not counted.
5	Dr. R Illanthiriyar	Professor	Biochemistry	No relieving order. Not counted
6	Mr. Md Ezaz Zafar	Asst Prof	Biochemistry	M. Sc Science faculty. Not Counted.
7	Mr. Shamsheer Ali Teeto	Tutor	Biochemistry	M. Sc Science faculty. Not Counted.
8	Dr. Mritunjay Kumar	Assoc. Prof.	Pharmacology	His dental college experience of 2 yrs and 7 months has not been counted. Does not have the requisite 5 yrs experience as Asst Prof. Counted as Asst. Prof.
9	Dr. Aninda Sen	Assoc. Prof	Microbiology	M. Sc & Ph. D Science faculty. Not counted
10	Dr. RPN Singh	Professor	Community Medicine	Does not have the requisite 4 years experience as Assoc. Prof. Counted as Assoc. Prof.
11	Dr. RK Pandey	Sr. Resident	Paediatrics	Does not have the requisite 3 years Jr. Residency experience. Counted as Jr. Resident.
12	Dr. Sudhanshu Kumar	Sr. Resident	Paediatrics	Does not have the requisite 3 years Jr. Residency experience. Counted as Jr. Resident.
13	Dr. Kanchan Kumar	Sr. Resident	Orthopaedics	Does not have the requisite 3 years Jr. Residency experience. Counted as Jr. Resident.
14	Dr. Raj Kumar Singh	Sr. Resident	ENT	Does not have the requisite 3 years Jr. Residency experience. Counted as Jr. Resident.
15	Dr. S Vivekanand	Assoc Prof	Radio-Diagnosis	His dental college experience of 10 months has not been counted. Does not have the requisite 5 yrs experience as Asst Prof. Counted as Asst. Prof.
16	Dr. SK Roy	Tutor	Radio-Diagnosis	Does not have the requisite 3 years Jr. Residency experience. Counted as Jr. Resident.
17	Dr. D Kumar	Asst Prof	Microbiology	M. Sc Med Microbiology. Does not have the requisite 3 years experience as Tutor. Counted as Tutor.
18	Dr. RN Sharma	Assoc Prof	Microbiology	His dental college experience of 2 yrs and 5 months has not been counted.

				Does not have the requisite 5 yrs experience as Asst Prof. Counted as Asst. Prof.
19	Dr. US Mazumdar	Assoc. Prof	Gen. Medicine	Does not have MD (General Medicine). He has DM (Neurology). Not counted.

(B). In view of above, the shortage of teaching staff required at present stage is as under :-

(a) The shortage of teaching faculty is 8.6% (i.e. 12 out of 139) as under:-

- (i) Professor : 2 (FMT –1 & Ophthalmology –1)
- (ii) Assoc. Prof. : 8 (Anatomy –1, Biochemistry –2, Pharmacology –1, Microbiology-1, General Medicine –1, Psychiatry –1, Radio-diagnosis – 1)
- (iii) Asst. Prof. :02 (Community Medicine –1, Obst. & Gynae. –1)

(b) The shortage of Residents is 6.7% (i.e. 5 out of 74) as under :-

- (i) Sr. Resident :05 (Paediatrics –2, Orthopaedic –1, Ophthalmology –1, Radio-diagnosis-1)

2. Clinical material is grossly inadequate as under:-

	Daily Average		Day of Inspection	
O.P.D. attendance	652		465	
Casualty attendance	15		12	
Bed occupancy%	82%		65%	
Operative work				
Number of major surgical operations	13		06	
Number of minor surgical operations	18		10	
Number of normal deliveries	01		01	
Number of caesarian Sections	0-1		-	
<u>Radiological Investigations</u>	O.P.	I.P.	O.P.	I.P.
X-ray	35	20	25	19
Ultrasonography	25	15	22	10
Special Investigations	03	02	01	01
C.T. Scan	03	01	01	-
<u>Laboratory Investigations</u>				
Biochemistry	86	60	82	31
Microbiology	13	10	18	08
Serology	14	15	08	07
Parasitology	09	04	04	01
Haematology	182	129	182	140
Histopathology	0	02	0	0
Cytopathology	03	02	06	05
Others	21	12	24	17

- Clinical material was poor. Most of the patients did not merit an admission. 256 patients were admitted a day before the inspection.
- The case sheets were poorly written with no doctors signatures. Treatment notes were also not signed.
- The bed occupancy was 65% on the day of inspection.
- Admission/discharge registers were either not available or were incomplete.
- No Anaesthesia Register was available in the O.T.
- The laboratory workload is low. One common lab. Investigation register was available where the entries were erratic. Mostly entries were found to be done on OPDs slips.

3. In OPD, immunization room does not have a refrigerator & no records of immunization were available. No facilities are provided for biomedical waste.

- 4. In wards, no ward is provided with doctors’ duty room, nurses’ duty room, pantry, and examination/procedure room & side laboratory.
- 5. In CSSD, bowl sterilizer, instrument washing machine, racks, trays & mixers are not available. CSSD facilities need to be upgraded.
- 6. Nursing staff is inadequate as under:-

Nursing Superintendent:	01
Deputy Nursing Superintendent:	02
Matron :	02
Asstt. Nursing Superintendent	02
Nursing Sisters	10
Staff nurses	120
- 7. Research laboratory of Anatomy & Physiology departments need to be upgraded.
- 8. Facilities in mortuary are inadequate. There is no cooling cabinet. There are no other facilities.
- 9. Books in departmental libraries of TB & Chest, Skin & VD, Psychiatry, Orthopaedics, ENT, Ophthalmology, Radio-diagnosis 7 Anaesthesia are inadequate.
- 10. Other deficiencies as pointed out in the inspection report.

In view of above and Govt. of India letter dated 15.3.2005 issued after the directions of the Hon’ble Supreme Court in case of Mridul Dhar v/s UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in Ist MBBS course from 60 to 100 at Katihar Medical College, Katihar u/s 10A of the I.M.C. Act,1956.

18. Increase of MBBS seats from 50 to 100 at A.N. Magadh Medical College, Gaya.

Read: The Council Inspectors report (27th & 28th May, 2008) for grant of letter of permission for increase of MBBS seats from 50 to 100 at A.N. Magadh Medical College, Gaya along with letter dated 10th June,2008 from the Secretary (Health Department), Govt. of Bihar.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and the Executive Committee of the Council considered the Council Inspectors report (27th & 28th May,2008) along with letter dated 10th June,2008 from the Secretary (Health Department), Govt. of Bihar and noted the following:-

- 1 (a) Dr. Shiv Kumari Prasad shown as the Medical Superintendent has only 4 years & 2 months of administrative experience against the requirement of 10 years as per Regulations and hence not eligible for the post.

(b) The shortage of teaching Faculty is 41.6% (i.e. 40 out of 96) as under:-

Professor	7	Pharmacology-1,Pathology-1, Microbiology-1,Paediatrics-1 Orthopaedics-1, E.N.T-1,Ophthalmology-1
Assoc. Prof.	12	Physiology-1, Pharmacology-1,Community Medicine-1,General Medicine-2, Paediatrics-1, T.B & Chest-1, Psychiatry-1,Gen.Surgery-2, Radio Diagnosis-1, Dentistry-1
Asstt. Prof.	20	Anatomy-3, Physiology-1, Biochemistry-1, Pharma Chemist-1, For.Med.-1,Community Medicine-3,Statistician-1,Paediatrics-1, Psychiatry-1,OBGY-4,Anaesthesia-1,Radio Diagnosis-1,Dentistry-1

Tutor 1 Biochemistry-1,

(c) Resident 68.91% (i.e. 51out of 74)

Sr. Resident 3 TB Chest-1, Psychiatry-1, Radio Diagnosis-1,
Jr. Resident 48 Gen.Medicine-7,,Paediatric-6,T.B.Chest-3
Dermatology-3, Psychiatry-3,Gen.Surgery-9,
Orthopaedics-6,E.N.T.-3, Ophthalmology-3
OBGY-5

2. Clinical material is inadequate as under:-

	Daily Average	Day of Inspection
Bed occupancy%	55-60	61
<u>Radiological Investigations</u>		
X-ray	17	47
Ultrasonography	14-15	30
Special Investigations	5 per month	Nil
C.T. Scan	2	2
<u>Laboratory Investigations</u>		
Biochemistry	14	38
Microbiology	6	2
Serology	5	15
Parasitology	1-2	nil
Haematology	90-100	247
Histopathology	nil	nil
Cytopathology	nil	nil
Others	nil	nil

- Facilities for Cytopathology and Histopathology investigations are not available.
 - Virology Lab. is not available.
3. There is no Psychiatry department in the hospital. Total 19 Teaching beds are deficient as under:-

Speciality	Required Beds/Units	Present Beds/Units	Deficiency if any
Paediatrics	50/2	40 /2	10 Paediatrics beds
Psychiatry	9/1	not functional	9 Psychiatry beds
Total	185/8	190/7	

4. Medical Education Unit is not available.
5. Examination hall is not available.
6. Animal house is not available.
7. In the central library Medlar facilities are not available.
8. Total number of journals subscribed are 51 against the requirement of 100 as per Regulations.

9. At RHTC, Bodhgaya - Lecturer cum medical officer having M.D.{P.S.M.} is not available. Messing facilities are not available. Lecture hall cum seminar room is available but audiovisual aids have not been provided.
10. At UHC - No Lecturer cum medical officer having M.D.{P.S.M.} is posted. The outpatient attendance is nil per day. Delivery services are not available. Facilities for diagnostic investigations and minor Surgery are not available. Sign boards and display boards of various rooms also need to be realigned.
11. Hostel accommodation is available only for 220 students against the requirement of 300 at this stage as per Regulations.
12. There is no boundary wall around the nurses hostel. The water supply & toilet facilities are grossly inadequate. Loose naked electrical wires are hanging all around the hostel area including the corridors.
13. There is no separate hostel for interns and residents. There is a combined hostel with total capacity of 102 which is inadequate.
14. Only 4 quarters are available within the campus for the teaching faculty which is grossly inadequate.
15. Few wards are provided duty doctor room, nurse duty room, nursing station, pantry (only in G.medicine & G.surgery), examination / procedure room, teaching area and side laboratory. The seminar halls are available only in General Medicine & General Surgery wards.
16. There is a separate registration counter for O.P.D. cases but it is not computerized. There is no medical record department. ICD X Classification of diseases is not followed for indexing.
17. Only 16 beds are available in casualty area against the requirement of 20 as per Regulations.No resuscitation equipments is available in the casualty.
18. In the Central laboratory, only Biochemistry investigations are done in the lab. available in Hospital. There is no facility to carry out Histopathology, Cytopathology & Virology investigations.
19. ICCU is inadequately equipped. There is no MICU available.
20. The labour room is having broken plaster, broken window panes, dingy corridors & fungus coated walls.
21. In Radio-diagnosis department only 2 static's units and one mobile unit are available which is inadequate. Ultrasound machine for Obstetrics & Gynaecology department is not available. Facilities and workload are inadequate. Protective measures as per BARC specification are not provided.
22. In CSSD receiving and distribution points are not separate.
23. Intercom facilities are not available
24. Mechanized Central laundry is not available. Only one tank with stagnant water is being used for washing the hospital linen which is unhygienic.
25. Kitchen is L.P.G type. There is no provision to supply special diet as recommended by Physician. Services of dietician are not available.
26. Paramedical staff is inadequate as under :

Laboratory Technicians: - 04
 Laboratory Assistants: - Nil
 Laboratory Attendants:- 05

27. Nursing Staff is inadequate as under :-
- | | |
|--------------------------------|-----|
| Nursing Superintendent: | Nil |
| Deputy Nursing Superintendent: | Nil |
| Matron | 01 |
| Asstt. Nursing Superintendent | 01 |
| Nursing Sisters | 12 |
| Staff nurses | 92 |
28. In Anatomy department, Histology Laboratory is shared with Physiology (Hematology laboratory). Research Laboratory is not available.
29. Haematology lab. of Physiology department and Histology lab. of Anatomy department is common. Demonstration room is shared by Anatomy department which is not as per Regulations.
30. In Biochemistry Department, there is no Departmental library cum seminar room.
31. In Pharmacology department - There is no demonstration room. Clinical Pharmacology & Pharmacy laboratory is not available. Museum is having inadequate drug specimens, Nil photographs, Nil medicinal plants and Nil graphs. Departmental library cum seminar room is not available. Catalogues are not available in the museum. There are no demonstration rooms. Demonstration room is shared between Pathology and Microbiology department which is not as per Regulations.
32. In Pathology department, there is no facility to carry out Histopathology & Cytopathology investigations work.
33. In Microbiology - Immunology work is not carried out in the department. The departmental library cum seminar room is not available. There is no research laboratory. Demonstration room is shared with Pathology department. Another demonstration room is also used as museum.
34. In Forensic Medicine Museum, there are no mounted and unmounted specimens.
35. Number of books in the departmental libraries in TB & Chest, Skin & VD, Psychiatry, ENT, Ophthalmology, Anaesthesia & Radio-diagnosis are inadequate.
36. There are no Jr. Residents in the hospital.
37. Other deficiencies as pointed out in the inspection report.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council further observed that the teaching faculty is deficient by 40.22% and the residents is deficient by 66.21% even for the existing intake of 90 seats as under:-

1. (a) The shortage of teaching faculty is 40.22% (i.e. 35 out of 87) as under:-
- | | | | |
|-------|-----------------|----|--|
| (i) | Professor | 7 | (Pharmacology -1, Pathology -1, Microbiology -1, Paediatrics -1, Orthopaedics -1, ENT -1 & Ophthalmology -1) |
| (ii) | Associate Prof. | 11 | (Pharmacology -1, Community Medicine -1, General Medicine -2, Paediatrics -1, TB & Chest -1, Psychiatry -1, Surgery -2, Radio Diagnosis -1 & Dentistry -1) |
| (iii) | Assistant Prof. | 16 | (Anatomy -1, Biochemistry -1, Forensic Medicine -1, Community Medicine -3, Statistician -1, Paediatrics -1, Psychiatry -1, Obst. & Gynae. -4, Anesthesia -1, Radio Diagnosis -1, Dentistry -1, Pharma. Chemist -1) |

(b) The shortage of Residents is 66.21% (i.e. 49 out of 74) as under:-

(i)	Sr. Resident	3	(TB & Chest -1, Psychiatry -1, Radio Diagnosis)
(ii)	Jr. Resident	46	(Dermatology -3, General Medicine -7, Paediatrics -6, TB & Chest -3, ENT -3, Psychiatry -3, General Surgery -9, Orthopaedics -6, Ophthalmology -3, Obst. & Gynae.-3)

In view of above and Govt. of India letter dated 15.3.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar v/s UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in Ist MBBS course from 50 to 100 at A.N.Magadh Medical College, Gaya u/s 10A of the I.M.C. Act, 1956.

It was further decided that the institute be directed to remove the deficiency of teaching faculty, Residents, para-medical and nursing personnel, equipment & instrumentation and other infrastructure for existing intake within a period of 1 month and submit the compliance.

19. Govt. Medical College, Kota – Renewal of permission for admission of 3rd batch of students against the increased intake i.e. from 50 to 100 for the academic session 2008-2009.

Read: The Council Inspectors report (22nd & 23rd May, 2008) along with letter from the Principal & Controller dated 11.06.2008 clarifying the experience of Dr. R.K. Aseri as Medical Superintendent and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W., for renewal of permission for admission of 3rd batch of students against increased intake i.e. from 50 to 100 for the academic session 2008-09 at Govt. Medical College, Kota.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council Inspectors report (22nd & 23rd May, 2008) along with letter from the Principal & Controller dated 11.06.2008 clarifying the experience of Dr. R.K. Aseri as Medical Superintendent and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of students against the increased intake i.e. from 50 to 100 for the academic session 2008-09 at Govt. Medical College, Kota.

20. Govt. Medical College, Thrissur – Renewal of permission for admission of 3rd batch of students against the increased intake i.e. from 100 to 150 for the academic session 2008-2009.

Read: The Council Inspectors report (27th & 28th May, 2008) for renewal of permission for admission of 3rd batch of students against increased intake i.e. from 100 to 150 for the academic session 2008-09 at Govt. Medical College, Thrissur and letter from the Principal dated 04.06.2008 along with declaration forms & joining reports of 2 Professors, 2 Assoc. Professors, 1 Asstt. Prof. & 1 Tutor and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council Inspectors report (27th & 28th May, 2008) and letter from the Principal dated 04.06.2008 along with declaration forms & joining reports of 2 Professors, 2 Assoc. Professors, 1 Asstt. Prof. & 1 Tutor and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of students against the increased intake i.e. from 100 to 150 for the academic session 2008-09 at Govt. Medical College, Thrissur.

21. Continuance of recognition of MBBS degree granted by Rajiv Gandhi University of Health Science, Bangalore in respect of students being trained at Sri Devraj Urs Medical College, Kolar.

Read: The compliance verification inspection report (22nd May, 2008) for continuance of recognition of MBBS degree granted by Rajiv Gandhi University of Health Science, Bangalore

in respect of students being trained at Sri Devraj Urs Medical College, Kolar along with Council Inspectors report (23rd April,2008).

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 (22nd May, 2008) along with Council Inspectors report (23rd April,2008) and decided to recommend that recognition of MBBS degree granted by Rajiv Gandhi University of Health Science, Bangalore in respect of students being trained at Sri Devraj Urs Medical College, Kolar be continued restricting the number of admission to 150 (One Hundred Fifty) students.

22. Continuance of recognition of MBBS degree granted by Maharashtra University of Health Sciences, Mumbai in respect of students being trained at Mahatama Gandhi Medical College, Navi Mumbai.

Read: The compliance verification inspection report (29th May, 2008) for continuance of recognition of MBBS degree granted by Maharashtra University of Health Sciences, Mumbai in respect of students being trained at Mahatama Gandhi Medical College, Navi Mumbai.

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 (29th May, 2008) along with Council Inspectors report (22nd April,2008) and decided to recommend that recognition of MBBS degree granted by Maharashtra University of Health Sciences, Mumbai in respect of students being trained at Mahatama Gandhi Medical College, Navi Mumbai be continued restricting the number of admission to 100 (One Hundred) students.

23. Approval of Malankara Orthodox Syrian Church Medical College, Kolenchery for the award of MBBS degree granted by Mahatma Gandhi University, Kottayam.

Read: The compliance verification inspection report (20th May, 2008) for approval of Malankara Orthodox Syrian Church Medical College, Kolenchery for the award of MBBS degree granted by Mahatma Gandhi University, Kottayam along with Council Inspectors reports (17th & 18th Jan.,2008 and 12th March,2008).

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 May,2008) along with Council Inspectors reports (17th & 18th Jan.,2008 and 12th March,2008) and decided to recommend to the Central Government to renew the permission for admission of 7th batch of 100 (One Hundred) MBBS students for the academic session 2008-09 at Malankara Orthodox Syrian Church Medical College, Kolenchery.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided to recommend that Malankara Orthodox Syrian Church Medical College, Kolenchery be approved for the award of MBBS degree granted by Mahatma Gandhi University, Kottayam with an annual intake of 100 (One Hundred) students per year. The Committee further decided to place the matter before the General Body of the Council for approval.

24. Continuance of recognition of MBBS degree granted by Maharashtra University of Health Sciences, Nashik in respect of students being trained at Dr. Panjabrao Alias Bhausabeh Deshmukh Memorial Medical College, Amravati.

Read: The compliance verification inspection report (15th & 16th May, 2008) for continuance of recognition of MBBS degree granted by Maharashtra University of Health Sciences, Mumbai in respect of students being trained at Dr. Panjabrao Alias Bhausabeh 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 considered the compliance verification inspection report (15th & 16th May, 2008) along with Council Inspectors report (5th & 6th January,2007) and noted the following:-

1 (a) The shortage of teaching staff is as under:-

Dr. D.S. Jane, Officiating Dean and Dr. V.S. Lawankar, Officiating Medical Superintendent cannot be considered as they are not full time Dean / Medical Superintendent respectively.

(b) The following teachers cannot be considered eligible due to the reasons mentioned below:-

S.No.	Name	Designation	Department	Remarks
1.	Dr.P.N.Kulkarni	Professor	Comm.Med.	He has completed the age of 65 years. Hence, cannot be considered.
2.	Dr.A.K. Bhutey	Professor	Biochemistry	M.Sc. from Science faculty. Hence cannot be considered.
3.	Dr.S.W.Chaudhary	Reader	Anaesthesia	In his declaration form he has shown his experience as Asstt. Prof. with only 4 years 3 months against the requirement of 5 years as per Regulations which is inadequate as Post partum Anaesthetist cannot be considered as teaching experience. Hence, cannot be considered.
4.	Dr.Vijaya P. Borkar	Reader	Anaesthesia	In her declaration form she has shown her experience as Asstt. Prof. of only 4 years 5 months which is inadequate against the requirement of 5 years as per Regulations. Hence, cannot be considered.
5.	Dr.Santosh Ramratan Pande	Assoc. Prof.	Anaesthesia	In his declaration form he has shown his experience as Asstt. Prof. of only 1 year 7 months which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.
6.	Dr.Sanjay Nathmal Agrawal	Reader	Dermatology	He does not possess the prescribed academic qualification required as per Regulations. Hence not eligible.
7.	Dr.Syed Rizwanuddin Qazi	Lecturer	Surgery	In his declaration form he has shown his experience as Resident of only 58 days which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.
8.	Dr.Kishor Krishnarao Bele	Lecturer	Surgery	In his declaration form he has shown his experience as Resident of only 1 year which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.
9.	Dr.Prabhakar B. Jawanjal	Lecturer	Surgery	In his declaration form he has shown his experience as Resident of only 1 year which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be

				considered.
10.	Dr.Mrs.Khairunnisa K. Khan	Lecturer	Anaesthesia	In her declaration form she has shown her experience as Resident only 10 months which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.
11.	Dr.Manoj Kisanlal Gupta	Lecturer	Anaesthesia	In his declaration form no experience has been shown as Resident in a recognized/permitted medical college against the requirement of 3 years as per Regulations. Hence cannot be considered.
12.	Dr.Deepa Pankaj Ghundiya	Lecturer	Comm.Med.	In her declaration form no experience has been shown as Tutor in a recognized/permitted medical college against the requirement of 3 years as per Regulations. Hence cannot be considered.
13.	Dr.Asha J. Bajaj	Lecturer	Pathology	In her declaration form no experience has been shown as Tutor in a recognized/permitted medical college against the requirement of 3 years as per Regulations. Hence cannot be considered.
14.	Dr.Sangita Tehre	Lecturer	Pathology	In her declaration form no experience has been shown as Tutor in a recognized/permitted medical college against the requirement of 3 years as per Regulations. Hence cannot be considered.
15.	Dr.Shripad Digambar Jahagirdar	Asstt. Prof.	Peadiatrics	In his declaration form he has shown his experience as Asstt. Prof. of only 1 year 6 months which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.
16.	Dr.Pankaj Vijaykumar barabde	Lecturer	Peadiatrics	In his declaration form he has shown his experience as Resident of only 1 year which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.
17.	Dr.S.N.Chaudhary	Lecturer	Obst. & Gynae	She does not possess the prescribed academic qualification required as per Regulations. Hence not eligible.
18.	Dr.Manisha N.Shambharkr	Tutor	Radiology	In her declaration form she has shown her experience as Resident only 7 months which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.

19.	Dr.Mrs.Vinita A. Saboo	Tutor	Anaesthesia	In her declaration form she has shown her experience as Resident only 1 year 8 months which is inadequate against the requirement of 3 years as per Regulations. Hence, cannot be considered.
20.	Dr.Niraj Arun Ghanwate	Demonstrator	Microbiology	M.Sc. from Science faculty. Hence cannot be considered.
21.	Dr.Rohit A. Ganeriwal	Sr.Resident	Anaesthesia	In his declaration form no experience has been shown as Resident in a recognized/permitted medical college against the requirement of 3 years as per Regulations. Hence cannot be considered.
22.	Dr.Anil Harishchandra Rohankar	Sr.Resident	TB & Chest	In his declaration form no experience has been shown as Resident in a recognized/permitted medical college against the requirement of 3 years as per Regulations. Hence cannot be considered.

© In view of above, the shortage of teaching faculty is more than 15 % as under:-

- i) Professor - 4 (Anatomy – 1, Biochemistry – 1, Pediatrics – 1, Community Medicine – 1.)
- ii) Associate Professor - 5 (Anatomy – 1, Biochemistry – 1, Forensic Medicine - 1, Skin & VD – 1, Anesthesia – 1)
- iii) Assistant Professor: - 7 (Anatomy – 2, Physiology – 1, Community Medicine – 2, Lecturer in Epidemiology – 1, Pathology – 1)
- iv) Tutor : - 6 (Pathology – 6)

(d) The shortage of Residents is more than 10 % as under: -

- i) Sr. Resident: - 8 (TB & Chest – 1, Surgery – 1, Radiology – 1, Anaesthesia – 4, Paediatrics – 1)
- ii) Jr. Resident: - 1 (Medicine – 1)

2. Clinical Material - Normally with increase in OPD and bed occupancy increase in other parameters like radiological investigations and laboratory investigations are seen. With high OPD and bed occupancy parallel increase in other parameters like radiological investigations and laboratory investigations are not seen. The high OPD attendance and bed occupancy do not commensurate with other parameters.
3. Hostel accommodation is inadequate as it is available only for 336 students against the requirement of 500.
4. Interns hostel is under construction.
5. Accommodation for only 66 residents is available against the requirement of 114 residents; thus it is inadequate.
6. Accommodation for nurses is grossly inadequate as only 10 double-seated rooms for accommodating 20 nurses are available.
7. Only 12 quarters are available within the campus for the teaching faculty, which are inadequate as per norms. In addition 17 staff quarters have been allotted to class III staff of the college. These quarters are ½ K. M. distance away from the college which is not as per norms.
8. Catalogues are still not available.

9. MRI & CT scan are still not available.
10. Lecture theatre with capacity of 250 seats are not available.
11. In certain areas of OPD and Wards, collection and segregation of hospital biological waste is not carried out as per the guidelines of Pollution Control Board.
12. There is no kitchen in the hospital. No Dietician. Food is supplied to the patients by contractors on payment.
13. Central sterilization department has only one room provided on the 2nd floor of the operation block. It has one cylindrical and one vertical autoclave. No other equipments are available in the CSSD. There is no water connection / taps available in the room. No exhaust fans. Only 2 racks were seen in CSSD. No trays and drums were seen. On an average daily 20 – 25 drums and 20 trays are prepared. Duty register of the staff is not available. CSSD should be established as per council guidelines.
14. Only 2 static units of 500 MA and 2 mobile units (1 of 100 MA and 1 of 60 MA) are available which is inadequate against the requirement of 4 static & 6 mobile units.
15. In OPD space provided for examination of patients and for doctors is inadequate. Most of the examinations rooms are without BP Instruments, examination tray, view box, etc. Water source is also not provided in all the chambers. Most of the specialties are not provided with teaching areas in OPD. There is no minor OT and dressing room for surgical OPD.
16. There is overcrowding of beds in wards. Patients of tuberculosis, Skin & VD and Psychiatry are kept in the Medicine Ward which is not acceptable.
17. Indoor case registration is done manually. For registration of OPD cases one computer is available. Registration counters are not computerized and cross linked with MRD Section.
18. Central suction is not functional.
19. Capacity of examination hall is only 110 which is inadequate against the requirement of 250 as per regulations.
20. Number of books in the library Skin, Psychiatry & Medicine are still inadequate.
21. Other deficiencies as pointed out in the inspection report.

In view of above and in view of persistent and continuing gross deficiencies of teaching faculty, residents, hostels, instrumentation & equipment and other infrastructure, 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 that the recognition for the award of MBBS degree granted by Maharashtra University of Health Sciences, Mumbai in respect of students being trained at Dr. Panjabrao Alias Bhausabesh Deshmukh Memorial Medical College, Amravati should be withdrawn u/s 19 of the IMC Act, 1956. It was further decided that the institute be directed not to make further admissions from the academic year 2008-09 onwards.

25. Approval of the Minutes of Finance Committee Meeting held on 21st May,2008.

Read: The minutes of the Finance Committee meeting held on 21st May, 2008.

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 Finance Committee meeting held on 21st May,2008.

26. Establishment of new medical college at Pawapuri, Nalanda by Government of Bihar for the academic year 2008-09

Read: The Central Govt. letter dated 15.05.2008 along with the proposal for establishment of new medical college at Pawapuri, Nalanda by Government of Bihar for the academic year 2008-09.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council observed that the proposal for establishment of new medical college at Pawapuri, Nalanda by Govt. of Bihar was received in the office of the Council on 22nd May, 2008. The statutory time schedule as per Regulations is as under:-

SCHEDULE FOR RECEIPT OF APPLICATIONS FOR ESTABLISHMENT OF NEW MEDICAL COLLEGES AND PROCESSING OF THE APPLICATIONS BY THE CENTRAL GOVERNMENT AND THE MEDICAL COUNCIL OF INDIA.

Stage of processing	Last date
1. Receipt of applications by the Central Govt.	From 1 st August to 31 st August (both days inclusive) of any year.
2. Receipt of applications by the MCI from Central Govt.	30 th September
3. Recommendations of Medical Council of India to Central Government for issue of Letter of Intent .	31 st December.
4. Issue of Letter of Intent by the Central Government.	31 st January.
5. Receipt of reply from the applicant by the Central Government requesting for Letter of permission.	28 th February
6. Receipt of Letter from Central Government by the Medical Council of India for consideration for issue of Letter of Permission.	15 th March
7. Recommendation of Medical Council of India to Central Government for issue of Letter of Permission.	15 th June.
8. Issue of Letter of Permission by the Central Government.	15 th July.

Note: (1) The information given by the applicant in Part-I of the application for setting up a medical college that is information regarding organization, basic infrastructural facilities, managerial and financial capabilities of the applicant shall be scrutinized by the Medical Council of India through an inspection and thereafter the Council may recommend issue of Letter of Intent by the Central Government.
(2) Renewal of permission shall not be granted to a medical college if the above schedule for opening a medical college is not adhered to and admissions shall not be made without prior approval of the Central Government....."

As per the above-mentioned mandatory time schedule prescribed for establishment of new medical colleges, the last date for receipt of applications by the MCI from the Central Government is 30th of September of the previous year. Thereafter, the process for consideration, the recommendations and issuance of Letter of Intent (LOI) has been prescribed in different stages, for all those applications which are received by the MCI from the Central Government by

30th September of the previous year. The Letter of Intent is to be issued by 31st January of the year subsequent to the previous year in which the applications had been received.

In the light of the above statutory time schedule, it is stated that the application of this college under section 10A of the Act has been received by the office of the Council from the Central Government only on 22.05.2008 i.e. after the prescribed last date under the Regulations for sending the applications u/s 10A for establishment of new medical colleges, by the Central Government and which for the present purpose is 30.9.2007.

The following directions of the Hon'ble Supreme Court in Mridul Dhar's case dated 12.1.2005 were also noted:

- 14. Time schedule for establishment of new college or to increase intake in existing college, shall be adhered to strictly by all concerned.*
- 15. Time schedule provided in Regulations shall be strictly adhered to by all concerned failing which defaulting party would be liable to be personally proceeded with.*

In view of above and in view of the directives and pronouncements of the Hon’ble Supreme Court from time to time in various judgements it is stated that the Regulations of the Council being statutory Regulations are mandatory and binding in character and are required to be adhered to by all the authorities, hence, it is neither possible nor permissible for the Council or for any other authority to relax the time schedule prescribed in the Establishment of Medical College Regulations, 1999. Hence, the application in original be sent back to the Govt. of India.

27. Establishment of new medical college at Madhepura by Government of Bihar for the academic year 2008-09.

Read: The Central Govt. letter dated 15.05.2008 along with the proposal for establishment of new medical college at Madhepura by Government of Bihar for the academic year 2008-09.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council observed that the proposal for establishment of new medical college at Madhepura by Govt. of Bihar was received in the office of the Council on 22nd May, 2008. The statutory time schedule as per Regulations is as under:-

SCHEDULE FOR RECEIPT OF APPLICATIONS FOR ESTABLISHMENT OF NEW MEDICAL COLLEGES AND PROCESSING OF THE APPLICATIONS BY THE CENTRAL GOVERNMENT AND THE MEDICAL COUNCIL OF INDIA.

Stage of processing	Last date
1. Receipt of applications by the Central Govt.	From 1 st August to 31 st August (both days inclusive) of any year.
2. Receipt of applications by the MCI from Central Govt.	30 th September
3. Recommendations of Medical Council of India to Central Government for issue of Letter of Intent .	31 st December.
4. Issue of Letter of Intent by the Central Government.	31 st January.
5. Receipt of reply from the applicant by the Central Government requesting for Letter of permission.	28 th February
6. Receipt of Letter from Central Government by the Medical Council of India for consideration for issue of Letter of Permission.	15 th March

7. Recommendation of Medical Council of India to Central Government for issue of Letter of Permission. 15th June.
8. Issue of Letter of Permission by the Central Government. 15th July.

Note: (1) The information given by the applicant in Part-I of the application for setting up a medical college that is information regarding organization, basic infrastructural facilities, managerial and financial capabilities of the applicant shall be scrutinized by the Medical Council of India through an inspection and thereafter the Council may recommend issue of Letter of Intent by the Central Government.

(2) Renewal of permission shall not be granted to a medical college if the above schedule for opening a medical college is not adhered to and admissions shall not be made without prior approval of the Central Government....."

As per the above-mentioned mandatory time schedule prescribed for establishment of new medical colleges, the last date for receipt of applications by the MCI from the Central Government is 30th of September of the previous year. Thereafter, the process for consideration, the recommendations and issuance of Letter of Intent (LOI) has been prescribed in different stages, for all those applications which are received by the MCI from the Central Government by 30th September of the previous year. The Letter of Intent is to be issued by 31st January of the year subsequent to the previous year in which the applications had been received.

In the light of the above statutory time schedule, it is stated that the application of this college under section 10A of the Act has been received by the office of the Council from the Central Government only on 22.05.2008 i.e. after the prescribed last date under the Regulations for sending the applications u/s 10A for establishment of new medical colleges, by the Central Government and which for the present purpose is 30.9.2007.

The following directions of the Hon'ble Supreme Court in Mridul Dhar's case dated 12.1.2005 were also noted:

14. *Time schedule for establishment of new college or to increase intake in existing college, shall be adhered to strictly by all concerned.*
15. *Time schedule provided in Regulations shall be strictly adhered to by all concerned failing which defaulting party would be liable to be personally proceeded with.*

In view of above and in view of the directives and pronouncements of the Hon'ble Supreme Court from time to time in various judgements it is stated that the Regulations of the Council being statutory Regulations are mandatory and binding in character and are required to be adhered to by all the authorities, hence, it is neither possible nor permissible for the Council or for any other authority to relax the time schedule prescribed in the Establishment of Medical College Regulations, 1999. Hence, the application in original be sent back to the Govt. of India.

28. Establishment of new medical college at Bettiah, Champaran by Government of Bihar for the academic year 2008-09.

Read: The Central Govt. letter dated 15.05.2008 along with the proposal for establishment of new medical college at Bettiah, Champaran by Government of Bihar for the academic year 2008-09.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that the proposal for establishment of new medical college at Bettiah by Govt. of Bihar was received in the office of the Council on 22nd May, 2008. The statutory time schedule as per Regulations is as under:-

SCHEDULE FOR RECEIPT OF APPLICATIONS FOR ESTABLISHMENT OF NEW MEDICAL COLLEGES AND PROCESSING OF THE APPLICATIONS BY THE CENTRAL GOVERNMENT AND THE MEDICAL COUNCIL OF INDIA.

Stage of processing	Last date
1. Receipt of applications by the Central Govt.	From 1 st August to 31 st August (both days inclusive) of any year.
2. Receipt of applications by the MCI from Central Govt.	30 th September
3. Recommendations of Medical Council of India to Central Government for issue of Letter of Intent .	31 st December.
4. Issue of Letter of Intent by the Central Government.	31 st January.
5. Receipt of reply from the applicant by the Central Government requesting for Letter of permission.	28 th February
6. Receipt of Letter from Central Government by the Medical Council of India for consideration for issue of Letter of Permission.	15 th March
7. Recommendation of Medical Council of India to Central Government for issue of Letter of Permission.	15 th June.
8. Issue of Letter of Permission by the Central Government.	15 th July.

Note: (1) The information given by the applicant in Part-I of the application for setting up a medical college that is information regarding organization, basic infrastructural facilities, managerial and financial capabilities of the applicant shall be scrutinized by the Medical Council of India through an inspection and thereafter the Council may recommend issue of Letter of Intent by the Central Government.

(2) Renewal of permission shall not be granted to a medical college if the above schedule for opening a medical college is not adhered to and admissions shall not be made without prior approval of the Central Government....."

As per the above-mentioned mandatory time schedule prescribed for establishment of new medical colleges, the last date for receipt of applications by the MCI from the Central Government is 30th of September of the previous year. Thereafter, the process for consideration, the recommendations and issuance of Letter of Intent (LOI) has been prescribed in different stages, for all those applications which are received by the MCI from the Central Government by 30th September of the previous year. The Letter of Intent is to be issued by 31st January of the year subsequent to the previous year in which the applications had been received.

In the light of the above statutory time schedule, it is stated that the application of this college under section 10A of the Act has been received by the office of the Council from the Central Government only on 22.05.2008 i.e. after the prescribed last date under the Regulations for sending the applications u/s 10A for establishment of new medical colleges, by the Central Government and which for the present purpose is 30.9.2007.

The following directions of the Hon'ble Supreme Court in Mridul Dhar's case dated 12.1.2005 were also noted:

- 14. Time schedule for establishment of new college or to increase intake in existing college, shall be adhered to strictly by all concerned.
- 15. Time schedule provided in Regulations shall be strictly adhered to by all concerned failing which defaulting party would be liable to be personally proceeded with.

In view of above and in view of the directives and pronouncements of the Hon’ble Supreme Court from time to time in various judgements it is stated that the Regulations of the Council being statutory Regulations are mandatory and binding in character and are required to be adhered to by all the authorities, hence, it is neither possible nor permissible for the Council or for any other authority to relax the time schedule prescribed in the Establishment of Medical College Regulations, 1999. Hence, the application in original be sent back to the Govt. of India.

29. Establishment of new medical college at Bokaro, Jharkhand by Bokaro Ispat Educational Trust.

Read: The letter dated 31.05.2008 received from the Dr. D.N. Mohapatra, E.D. & Dir (M&HS), Bokaro General Hospital, Bokaro along with the proposal for establishment of new medical college Bokaro, Jharkhand by Bokaro Ispat Educational Trust.

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 31.05.2008 received from the college authorities informing that they are not prepared for inspection of proposed medical college at Bokaro and they will inform the exact period as and when they are prepared for the same.

In view of above and Govt. of India letter dated 15.03.2005 issued after the directions of the Hon’ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. requesting the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of scheme for establishment of new medical college at Bokaro, Jharkhand by Bokaro Ispat Educational Trust as there is no provision in the IMC Act,1956 or Regulations framed thereunder to keep the application pending with the Council for the next academic year.

30. The Clinical Establishments (Registration and Regulation) Bill, 2007

Read: The letter dated 13.05.2008 received from Ms. Arpana Mendiratta, Deputy Director, Parliament of India, Rajya Sabha Secretariat with regard to Clinical Establishments (Registration and Regulation) Bill, 2007.

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 13.05.2008 received from Ms. Arpana Mendiratta, Deputy Director, Parliament of India, Rajya Sabha Secretariat with regard to Clinical Establishments (Registration and Regulation) Bill, 2007 and observed that the representatives of the Council – i.e. Dr. Ved Prakash Mishra, Member, Executive Committee and Lt.Col.(Retd.) Dr. A.R.N. Setalvad, Secretary of the Council were invited as witnesses to appear before the Committee on 27th May,2008. The Executive Committee/Adhoc Committee ratified the following submissions made before the Parliamentary Standing Committee by Dr. Ved Prakash Mishra and Dr. Setalvad, as under:-

THE CLINICAL ESTABLISHMENTS (REGISTRATIONS & REGULATION) BILL
2007

Clause-wise observations of the Medical Council India, New Delhi.

S. No	Present Clause	Suggested Modifications	Reasons/ Basis
01	Clause No 02 (C) Definition of the word clinical establishment states that “ Clinical Establishment will have facilities with beds requiring diagnosis, treatment or care for illness, injury, deformity, abnormality or pregnancy in any recognized	This is contrary to the explanation appended to Section 11, which reads, “ For the purposes of this section, “Carry On” means to admit patients in a clinical	By virtue of “Explanation” appended to section 11, on interpolation with definition of clinical establishment at Section 2 (C), it is

	system of medicine including a single doctor establishment”	establishment for providing treatment, diagnosis, nursing care.”	imperative that a Clinical Establishment shall be one which ought to have facilities to admit patients mandating existence of “indoor beds” so as to be covered under the purview of the proposed bill. As such, this is impermissible in the teeth of the definition at sub clause 2(C). Therefore the dichotomy needs to be corrected.
02	Under Section 3 (E) it is stated “ One representative to be elected by the central council of Indian Medical Association constituted under Section 3 of Indian Medical Council Act 1956.”	The word under section 3 of Indian Medical Council Act should be deleted.	Central Council of Indian Medical Association cannot be constituted under Section 3 of Indian Medical Council Act 1956. There seems to be some confusion as it is the Medical Council of India which is constituted under Section 3 of the Indian Medical Council Act, 1956. Indian Medical Association is an all together a separate entity and has nothing to do with the Medical Council of India. Further, representative to be elected by the MCI is already incorporated in Section 3(2)(b)(ii) of the bill.
03	In terms of Section 10 it is proposed that, “ The State Government shall, by notification, designate the District Health officer or the Chief Medical Officer (By Whatever name called) as an authority to be called the “District Registering Authority” for each district for the Registration of Clinical Establishment”	The local Self Authorities presently vested with the authority to register have been left out.	The proposed provision negates the existing jurisdiction vested with the local self bodies whereby it goes contrary to the concept of devolution of authority to the local self bodies in the context of National Committee Report of Macroeconomics for the year 2005.
04	Under Section 12 (II) it is	The Provision is	It calls for realistic

	proposed that “for the registration and continuation, every clinical establishment shall fulfill the minimum qualification of the personnel as may be prescribed”	stringent in nature.	evaluation in the context of poor availability of the para-medical personnel with desired and required qualifications all over the country because of various constraints and limitations.
05	Under Section 12 (III) it is further provided that “for the registration and continuation provisions for maintenance of records and reporting as may be prescribed.”	The provision is not called for; because the same is as of now governed by the ‘Code of Medical Ethics’, which is a Regulation, notified by the Government of India on the recommendations of the Medical Council of India vide Section 33 of the IMC Act 1956.	The ‘Code of Medical Ethics’ being a Regulation under Section 33 of IMC Act 1956, has got a ‘mandatory’ character and a ‘binding’ effect and is required to be adhered to all the authorities. Even the Hon’ble Supreme Court in its various pronouncements has held the Code of Medical Ethics to be a valid and binding Regulation. Hence, a provision in this bill is superfluous and is not warranted and it should not contradict another provision of an existing Regulation.
06	Section 14 (5) states that, “For the purposes of registration of clinical establishment under Section 10 , an application in the prescribed Proforma along with the prescribed fees to be submitted” (Sub-Clause 5) “if any clinical establishment is already registered under any existing law requiring registration of such establishments, even then it shall apply for registration as referred to in subsection (1)”	This subsection needs to be deleted	The provision should have a ‘prospective’ effect rather than a ‘retrospective’ effect.
07	Section 20 of the proposed bill reads “the certificate of registration shall be non transferable and, in the event of change of ownership or change of management or on ceasing to function as clinical establishment, the certificate of registration shall be surrendered to the authority and the clinical establishment shall apply a fresh for the grant of registration”	This section needs to be deleted.	The provision is inconsistent with the age-old provision of Societies Registration Act, whereby, in case of the change of management, a change report is to be submitted for incorporation and not afresh

			registration is required to be sought.
08	Section 26 & 27 Section 26 reads “As soon as the clinical establishment submits the required evidence of the clinical establishments having complied with the prescribed minimum standard the authorities shall cause to be displayed for information of the public at large and for filing objections, if any, in such manner, as may be prescribed, all evidence submitted by the clinical establishment of having complied with the prescribed minimum standard for a period of 30 days before processing for grant of permanent registration” Section 27 reads “ If objections are received within the period referred to in the preceding sections , such objections shall be communicated to the clinical establishments for response within a period as may be prescribed”	Both the sections need to be deleted.	These provisions realistically would be creating an anarchy like situation. Operationally it would mean generating a handy business to unscrupulous elements of raising false and fictitious objections and utilizing the same towards ‘bargaining and blackmailing’ purposes. Further the credentials and standards of the clinical establishments are required to be regulated on the basis of the technical inputs of experts in their respective professions and not by way of general dispensation from the public at large.
09	Sections 40,41,42,43 govern penalty for non registration, disobedience of order, obstruction and refusal of information and penalty invocable for minor deficiencies	The amounts which have been incorporated as a penalty range from Rs. 10,000/- to Rs. 5,00,000/-. the imposable penalty amounts are exorbitant and unreasonable.	Even in Indian Penal Code, much severe offences criminal in nature do not invoke such high penalty. This may be viewed in the context of the fact that failure of registration or violation of terms and conditions does not constitute an “ offence” but amounts to “irregularity”. Despite this settled position, prohibitive penalties have been stipulated, creating a picture as if professionals are indulging in some grave anti-social activities.
10	Section 48. It Reads, “every clinical establishment shall within such time or within such extended time as may be	The clause needs be deleted.	This is necessary because in the name of word ‘statistics’ from anything to

	prescribed in that behalf, furnish to the authority or the State Registrar or the National Council, such returns or statistics and other information in such manner as may be prescribed by the State Government from time to time.		everything can be envisaged which would not only give the leverage to the regulating authority but also provide a handy tool to it for concluding a violation by the clinical establishment
11.	Section 56(1)	This Section needs to be deleted.	This section provides that the provisions of this act shall not be applied to the States in which the enactments of the specified in their schedule are applicable. This is necessary because if the act is proposed to be applied throughout India than it is absolutely essential and vital that the provisions of the Bill are applicable on a uniform basis throughout the country as a whole these are highly technical subjects and ideal or desirable requirements cannot vary from state to state. If the existing Acts passed by the various State Legislatures are allowed to stand, it would lead a dichotomous situation in as much as it is a settled principle in constitutional law that in the subjects covered under dual list, it is the Parliamentary enactment which would prevail over all other state legislatures enactments. Also provisions of the different legislatures being made

			applicable in different States would make it extremely difficult for the National Council and National authority to formulate a comprehensive policy and function effectively.
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It may further be noted that the majority of the States as of now, already have a state enactment in place. The perception brought out in the “Objectives” of the proposed bill brings out that the said system operating in states has proved to be ineffective. However, no material official or authoritative is referred to nor any credible evidence is brought out to buttress the said observation.

The aforesaid provisions that have been refereed to of the proposed bill are also “restrictive” in character and therefore may not be consistent with the mandate included under Article 1 9 (1)(g) of the Constitution of India.

The aforesaid observations may be given a serious thought by the Honorable Committee in the larger interests of the society in general and those of the registered medical fraternity with Medical Council of India and its State Medical Councils in particular.”

31. Paramedical and Physiotherapy Central Council Bill – 2007.

Read: The D.O. letter dated 13.05.2008 from Dr. H.C. Goyal, Govt. of India, Directorate General of Health Services, New Delhi with regard to Paramedical and Physiotherapy Central Council Bill- 2007.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the D.O.letter dated 13.05.2008 from Dr. H.C. Goyal, Govt. of India, Directorate General of Health Services, New Delhi with regard to Paramedical and Physiotherapy Central Council Bill- 2007 and decided to appoint a Sub-Committee comprising of Dr. D.K. Sharma, Chairman, Registration & Equivalence Committee; Dr. C.V.Bhirmanandham, Chairman, TEQ Sub-Committee and Dr. V.P. Mishra, Member, Executive Committee to go through the Bill and to submit its report at the earliest.

32. Problems related to recognition of MBBS/BDS degrees obtained in India in the Russian Federation

Read: The D.O. letter dated 17.04.2008 received from Sh. Rajiv Sinha, Counsellor (Edn), Embassy of India, Moscow addressed to Sh. Sunil Kumar, Joint Secretary Education, HRD Ministry, Department of Education, Shastri Bhawan, New Delhi and copy to this Council with regard to problems related to recognition of MBBS/BDS degree obtained in India in the Russian Federation.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the D.O.letter dated 17.04.2008 from Sh. Rajiv Sinha, Counsellor (Edn), Embassy of India, Moscow addressed to Sh. Sunil Kumar, Joint Secretary Education, HRD Ministry, Department of Education, Shastri Bhawan, New Delhi and copy to this Council with regard to problems related to recognition of MBBS/BDS degree obtained in India in the Russian Federation and decided to appoint a Sub-Committee comprising of _ Dr. D.K. Sharma, Chairman, Registration & Equivalence Committee; Dr. C.V.Bhirmanandham, Chairman, TEQ Sub-Committee and Dr. V.P. Mishra, Member, Executive Committee to go through the matter and to submit its report at the earliest.

33. Removal of name of Dr. Dharamveer Kochar from the Indian Medical Register.

Read: The letter dt. 06.05.2008 received from the Registrar, Rajasthan Medical Council, Jaipur with regard to removal of name of Dr. Dharamveer Kochar from the Indian Medical Register.

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 06.05.2008 received from the Registrar, Rajasthan Medical Council, Jaipur intimating that Dr. Dharamveer Kochar bearing Regn. No.1503, dated 21.02.1966 had expired on 04.05.2008 as per news published in Rajasthan Patrika dated 06.05.2008 and his name has been removed 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 give intimation in this regard to all the State Medical Councils in the country.

34. Removal of name of Dr. Satya Narain Indora from the Indian Medical Register.

Read: The letter dt. 21.05.2008 received from the Civil Surgeon-cum-District Appropriate Authority (PNDT), Faridabad with regard to removal of name of Dr. Satya Narain Indora from the Indian Medical Register.

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 21.05.2008 received from the Civil Surgeon-cum-District Appropriate Authority (PNDT), Faridabad informing that Dr. Satya Narain Indora bearing Registration No.MCI-7479, dated 28.11.1998) has been convicted by the Hon'ble Court of Chief Judicial Magistrate, Faridabad in the case "State Versus Dr. S.N. Indora and Other under PNDT Act,1994.

He further informed that as per provision under Section 23 of PNDT Act, 1994, the name of Medical Practitioner shall be reported by the Appropriate Authority to the Medical Council concerned for taking necessary action including suspension of the registration if the charges are framed by the Court and till the case is disposed of and on conviction for removal of his name from the Register of the Council for a period of five years for the first offence and permanently for the subsequent offence.

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 remove the name of above mentioned doctor for a period of five years from the Indian Medical Register and also give intimation in this regard to all the State Medical Councils in the country.

35. Mandya Institute of Medical Sciences, Mandya – Renewal of permission for admission of 3rd batch for the academic session 2008-2009.

Read: The Council Inspectors report (27th & 28th May, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Mandya Institute of Medical Sciences, Mandya along with letter dated 13.06.2008 from the Principal alongwith joining reports of 4 teaching faculty and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 May,2008) along with letter dated 13.06.2008 from the Principal along with joining reports of 4 teaching faculty and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 (One Hundred) MBBS students at Mandya Institute of Medical Sciences, Mandya for the academic session 2008-09.

36. Belgaum Institute of Medical Sciences, Belgaum – Renewal of permission for admission of 3rd batch of students for the academic session 2008-2009.

Read: The compliance verification inspection report (30th May, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Belgaum Institute of Medical Sciences, Belgaum along with Council Inspectors report (30th April

& 1st May,2008) and letter from the Principal/Dean dated 06.06.2008 along with the Declaration Forms & joining reports of 1 Sr. Resident and 3 Jr. Residents along with letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (30th May, 2008) along with Council Inspectors report (30th April & 1st May,2008) and letter from the Principal/Dean dated 06.06.2008 along with the Declaration Forms & joining reports of 1 Sr. Resident and 3 Jr. Residents along with letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 (One Hundred) MBBS students at Belgaum Instt. of Medical Sciences, Belgaum for the academic session 2008-09.

37. Govt. Medical College, NDMC, Jagdalpur – Renewal of permission for admission of 3rd batch of students for the academic session 2008-09.

Read: The compliance verification inspection report (30th May, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Govt. Medical College, NDMC, Jagdalpur along with Council Inspectors report (17th & 18th April,2008) and undertaking from the Director of Medical Education, Govt. of Chhatisgarh dated 12.06.2008 to rectify the deficiencies and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (30th May, 2008) along with Council Inspectors report (17th & 18th April,2008) and undertaking from the Director of Medical Education, Govt. of Chhatisgarh dated 12.06.2008 to rectify the deficiencies and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 50 (Fifty) MBBS students at Govt. Medical College, NDMC, Jagdalpur for the academic session 2008-09.

38. Agartala Govt. Medical College, Agartala – Renewal of permission for admission of 4th batch of students for the academic session 2008-09.

Read: The Council Inspectors report (3rd & 4th June, 2008) for renewal of permission for admission of 4th batch of students for the academic session 2008-2009 at Agartala Govt. Medical College, Agartala along with letter from the Principal of the institute dated 12.06.2008 clarifying teaching experience of Dr. A.K. Singh, Professor of Orthopaedics and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 June, 2008) along with letter from the Principal of the institute dated 12.06.2008 clarifying teaching experience of Dr. A.K. Singh, Professor of Orthopaedics and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 4th batch of 100 (One Hundred) MBBS students at Agartala Govt. Medical College, Agartala for the academic session 2008-09.

39. Hassan Institute of Medical Sciences, Hassan - Renewal of permission for admission of 3rd batch of students for the academic session 2008-2009.

Read: The compliance verification inspection report (29th May, 2008) along with Council Inspectors report (11th & 12th April,2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Hassan Institute of Medical Sciences, Hassan and letter from the Principal dated 13.06.2008 alongwith joining reports of 7 teaching faculty and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (29th May, 2008) along with Council Inspectors report (11th & 12th April,2008) and letter from the Principal dated 13.06.2008 alongwith joining reports of 7 teaching faculty and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to

recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 (One Hundred) MBBS students at Hassan Institute of Medical Sciences, Hassan for the academic session 2008-09.

40. Establishment of new medical college at Delhi Cantt. by Army Welfare Educational Society, New Delhi.

Read: The Council Inspectors report (3rd & 4th June, 2008) for grant of Letter of Permission for establishment of new medical college at Delhi Cantt., by Army Welfare Educational Society, New Delhi u/s. 10(A) of the IMC Act, 1956 alongwith the letter from the Dean dated 09.06.2008 alongwith declaration forms and joining reports of 3 personnel.

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 June, 2008) along with letter from the Principal/Dean dated 09.06.2008 along with the Declaration Forms & Joining Reports of 3 personnel and decided to recommend to the Central Govt. to issue Letter of Permission for establishment of new medical college at Delhi Cantt. By Army Welfare Educational Society with an annual intake of 100 (One Hundred) MBBS students for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

41. Establishment of New Medical College at Srinagar, Pauri Garhwal by Govt. of Uttranchal.

Read: The Council Inspectors report (3rd & 4th June, 2008) for grant of Letter of Permission for establishment of new medical college at Srinagar, Pauri Garhwal by Govt. of Uttranchal u/s. 10(A) of the IMC Act, 1956 along with letter from the Dean dated 11.06.2008 along with the Declaration Forms & Joining Report of 1 Asstt. Prof. and 1 Resident and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 June, 2008) along with letter from the Dean dated 11.06.2008 along with the Declaration Forms & Joining Report of 1 Asstt. Prof. and 1 Resident and letter dated 15.7.2004 from 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 establishment of new medical college at Srinagar, Pauri Garhwal by Govt. of Uttranchal with an annual intake of 100 (one hundred) MBBS students for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

42. V.S.S. Medical College, Burla – Renewal of permission for admission of 2nd batch of students against the increased intake i.e. from 107 to 150 for the academic session 2008-2009.

Read: The Council Inspectors report (30th & 31st May, 2008) for renewal of permission for admission of 2nd batch of students against increased intake i.e. from 107 to 150 for the academic session 2008-09 at VSS Medical College, Burla and letter from the Principal/Dean dated 07.06.2008 along with the Declaration Forms and Joining Reports of 11 Assoc. Professors and letter dated 11.06.2008 from the Principal alongwith declaration forms and joining reports of 26 Tutors and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (30th & 31st May, 2008) and letter from the Principal/Dean dated 07.06.2008 along with the Declaration Forms and Joining Reports of 11 Assoc. Professors and letter dated 11.06.2008 alongwith declaration forms and joining reports of 26 Tutors and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 2nd batch of MBBS students against the increased intake i.e. from 107 to 150 for the academic session 2008-2009 at VSS Medical College, Burla.

43. Increase of MBBS seats from 50 to 100 at Jawaharlal Nehru Medical College, Bhagalpur, Bihar.

Read: The Council Inspectors report (27th & 28th May, 2008) for grant of letter of permission for increase of MBBS seats from 50 to 100 at Jawaharlal Nehru Medical College, Bhagalpur, Bihar along with letter dated 10th June,2008 from the Secretary (Health Department), Govt. of Bihar.

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 May,2008) along with letter dated 10th June,2008 from the Secretary (Health Department), Govt. of Bihar and noted the following:-

1. The shortage of teaching staff required at present stage is as under:-
 - (a) The shortage of teaching faculty is 28.86 %
 - i) Professor- 06 (01 Pathology, 01 Paeds, 01 Surgery, 01 Ophthal, 01 Anaesth, 01 Radiology)
 - ii) Assoc. Prof.05 (02 Anatomy, 01 Physiology, 01 OBG, Dentistry 01)
 - iii) Asstt. Prof.16 (01 Physiology, 01 Biophysicist, 01 Biochemistry, 01 Pathology, 01 Micro, 04 PSM, 01 TB Chest, 01 Psychiatry, 01 Ortho, 02 OBG, 01 Anaesth, 01 Dentistry)
 - iv) Tutor-01 (01 Anatomy)
 - (b) The shortage of Residents is 19.22 % as under :-
 - i) Sr. Resident 01 (01 Radiology)
 - ii) Jr. Resident 14 (03 Medicine, 02 Pediatrics, 03 T.B. & Chest,01 Dermatology, 05 Surgery)
 - (c) Head of Biochemistry department, Dr. Jaganmoy Bhattacharya possesses degree from science faculty which is not as per Regulations.
2. Clinical material is inadequate in terms of OPD attendance, x-ray investigations and laboratory investigations are as under:-

	Daily Average		Day of Inspection	
O.P.D. attendance	591.3		806	
<u>Radiological Investigations</u>	O.P.	I.P.	O.P.	I.P.
X-ray	29	16	16	8
<u>Laboratory Investigations</u>				
Biochemistry	80		109	
Microbiology	6.9		14	
Serology	1.8		2	
Parasitology	4		9	
Haematology	600		983	
Cytopathology	0.3		1	
Biopsy	0.4		3	
Others				

3. No photographer is available in the Central Photography cum audio visual unit.
4. At RHTC & UHC, no lecturer cum medical officer having MD (PSM) is available. No hostel facility is available at UHC.
5. Workshop is not available in the college.
6. Services of dietician are not available at the kitchen.

7. Number of books in the departmental libraries of Pathology, Anatomy, Forensic Medicine, Medicine, TB & Chest, Skin & VD, Psychiatry, Paediatrics, Surgery, Orthopaedics, ENT, Ophthalmology, Radio-Diagnosis and Anaesthesia are not adequate.
8. In Biochemistry department, research lab. is not available. The Head of the department is non-medical with degree from science faculty but working in Govt. Medical College for more than 20 years.
9. In Pathology department, museum is grossly congested and needs to be expanded.
10. No courses have been conducted by the Medical Education Unit in the last year.
11. Examination hall has capacity of 100 only which is inadequate.
12. Auditorium has capacity of 100 only which is inadequate.
13. There are 20 tables in 12 operation theatres which is not as per norms. Some operation theatres are not air conditioned.
14. In CSSD, receiving and distribution points are not separate.
15. There is no research laboratory in Community Medicine and Microbiology.
16. Other deficiencies/remarks pointed out in the main report.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that the teaching faculty is deficient by 28.7% and the residents is deficient by 32.4% even for the existing intake of 50 seats as under:-

1. (a) The shortage of teaching faculty is 28.7% (i.e. 25 out of 87) as under:-

(i)	Professor	6	((Pathology -1, Paediatrics -1, General Surgery -1, Ophthalmology -1, Anaesthesia -1, Radio Diagnosis -1)
(ii)	Associate Prof.	3	(Anaesthesia -1, Obst. & Gynae. -1, Dentistry -1)
(iii)	Assistant Prof.	15	(Biochemistry -1, Pathology -1, Microbiology -1, Community Medicine -4, TB & Chest -1, Psychiatry -1, Orthopaedics -1, Obst. & Gynae. -2, Anaesthesia -1 & Dentistry -1, Lect. Biophysics-1)
(iv)	Tutor	1	(Radiology -1)

(b) The shortage of Residents is 32.4% (i.e. 12 out of 74) as under:-

(i)	Jr. Resident	12	(General Medicine – 1, Paediatrics – 2, TB & Chest -3, Skin & VD -1 & General Surgery -5)
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In view of above and Govt. of India letter dated 15.3.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar v/s UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in Ist MBBS course from 50 to 100 at Jawaharlal Nehru Medical College, Bhagalpur, Bihar u/s 10A of the I.M.C. Act, 1956.

It was further decided that the institute be directed to remove the deficiency of teaching faculty, Residents, para-medical and nursing personnel, equipment & instrumentation and other infrastructure for existing intake within a period of 1 month and submit the compliance.

44. Increase of MBBS seats from 50 to 100 at Sri Krishna Medical College, Muzaffarpur, Bihar.

Read: The Council Inspectors report (30th & 31st May, 2008) for grant of letter of permission for increase of MBBS seats from 50 to 100 at Sri Krishna Medical College,

Muzaffarpur, Bihar along with letter dated 10th June,2008 from the Secretary (Health Department), Govt. of Bihar.

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 (30th & 31st May,2008) along with letter dated 10th June,2008 from the Secretary (Health Department), Govt. of Bihar and noted the following:-

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

(a)The shortage of teaching faculty is 33.33 % as under:

- i) Professor-6 Physiology-1, Forensic Medicine-1, Paediatrics-1, Orthopaedics-1, Anaesthesia-1, Radio-diagnosis-1
- ii) Associate Prof.-7 Anatomy-1, Physiology-1, General Medicine-1, Psychiatry-1, Orthopaedics-1, ENT-1, Dentistry-1
- iii) Assistant Prof.-16 Anatomy-3, Physiology-2, Forensic Medicine-1, Community Medicine-3, TB & Chest-1, Skin & VD-1, Psychiatry-1, Anaesthesia-2, Radio-Diagnosis-1, Dentistry-1
- iv) Tutor-3 Biochemistry-1, Forensic Medicine-1, Dentistry-1

(b) The shortage of Resident is 38.16 % as under :

- i) Senior Resident-2 TB & Chest-1, Radio-diagnosis-1
- ii) Junior Resident-27 Paediatrics-2, TB & Chest-3, Skin &VD-3, Psychiatry-3, Surgery-3, Orthopaedics-3, ENT-3, Ophthalmology-3, Obst. & Gynae.-4

- 2. Registration and Medical Record Section are not computerized. ICD X Classification of diseases is not followed for indexing.
- 3. Radiological Facilities : No ultrasound is given to Obstetrics & Gynaecology department.
- 4. Kitchen : There is no provision to supply special diet as recommended by physician.
- 5. R.H.C. : No lady MO is posted here. No indoor services are provided. No lab investigations, x ray and ECG are not done at this center. The interns are present during the round but they do not stay as no facilities are available and they travel daily from the college with bus provided by the college authority.

UHC : No lecturer or MO with MD[PSM] is posted at the center.

- 6. Only 5 O.Ts. are available against the requirement of 8 at this stage as per Regulations. These 5 O.Ts. have 10 tables which is not as per norms.
- 7. Paramedical staff is inadequate as under:-

Laboratory Technician	-	14
Laboratory Assistant	-	04
Laboratory Attendants	-	06

- 8. Anatomy Department: There are 3 demonstration rooms of 20 seats each against the requirement of 2 demonstration rooms of 50-60. Museum is not divided in parts.
- 9. Other deficiencies as pointed out in the inspection report.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council further observed that the teaching faculty is deficient by 29.8% and the residents is deficient by 39.1% even for the existing intake of 50 seats as under:-

1. (a) The shortage of teaching faculty is 29.8% (i.e. 26 out of 87) as under:-

(i)	Professor	5	(Physiology -1, Paediatrics -1, Orthopaedics -1, Anaesthesia -1 & Radiology -1)
(ii)	Associate Prof.	5	(General Medicine -1, Psychiatry -1, Orthopaedics -1, ENT-1 & Dentistry -1)
(iii)	Assistant Prof.	14	(Anatomy -2, Forensic Medicine -1, Community Medicine -3, TB & Chest -1, Skin & VD -1, Psychiatry -1, Anaesthesia -2, Radiology -1 & Dentistry -1, Lect. Biophysics -1)
(iv)	Tutor	1	(Dentistry -1)

(b) The shortage of Residents is 39.1% (i.e. 29 out of 74) as under:-

(i)	Sr. Resident	2	(TB & Chest -1, Radiology -1)
(ii)	Jr. Resident	27	(Paediatrics -2, TB & Chest -3, Skin & VD -3, Psychiatry -3, General Surgery -3, Orthopaedics -3, ENT -3, Ophthalmology -3, Obst. & Gynaes. -4)

In view of above and Govt. of India letter dated 15.3.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar v/s UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in Ist MBBS course from 50 to 100 at Sri Krishna Medical College, Muzaffarpur, Bihar u/s 10A of the I.M.C. Act, 1956.

It was further decided that the institute be directed to remove the deficiency of teaching faculty, Residents, para-medical and nursing personnel, equipment & instrumentation and other infrastructure for existing intake within a period of 1 month and submit the compliance.

45. Increase of MBBS seats from 90 to 150 at Darbhanga Medical College, Laherisarai, Bihar.

Read: The Council Inspectors report (30th & 31st May, 2008) for grant of letter of permission for increase of MBBS seats from 90 to 150 at Darbhanga Medical College, Laherisarai, Bihar along with letter dated 10th June, 2008 from the Secretary (Health Department), Govt. of Bihar.

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 (30th & 31st May, 2008) along with letter dated 10th June, 2008 from the Secretary (Health Department), Govt. of Bihar and noted the following:-

1. (a) There is no regular Principal/Dean. Dr. S.N.Sinha who is Professor & HOD of Biochemistry is the acting Principal.
- (b) The shortage of teaching faculty is 82 out of 193 (42.8%) as under:-
 - i) Professor- 08 (Patho.-01, Micro-01, Paed-01, Ortho-01, OBG & Gynae-01, Anaes-01, Radiodiagnosis-01, Dentistry-01)
 - ii) Assoc. Prof.-22 (Anat-01, Biochemistry-01, Foren.Med-01, Gen.Med.-01, Paed-02, Psych-01, Gen-Surgery-05, Ortho-02, OBG & Gynae-4, Anaes-02, & Radiodiagnosis-02)
 - iii) Asstt.Prof.- 44 (Anat-02, Phy-01, Biochemistry-01, Pharma-03, Forensic Medicine-01, Community Medicine-05, Gen-Medicine-04, Paed-02, T.B. & Chest-01, Dermatology-01, Psych-01, Gen-Surgery-06, Ortho-03, OBG & Gynae-06, Anaes-04, Radiodiagnosis-02 & Dentistry-01)
 - iv) Tutor - 08 (Anatomy-02, Physiology-02, Forensic Medicine-01, Community Medicine-03)

(c) The shortage of Residents is 14 out of 127 (11.2%) as under :-

- i) Sr. Resident -06 (T.B. & Chest-01, Psych-01, Ortho-01, Ophthalmology-01, Anaesthesia-01 & Radiodiagnosis-01)
- ii) Jr. Resident-08 (T.B. & Chest-02, Dermatology-03, Psych-03)
- (d) The departments of Pathology, Microbiology, Paediatrics, Orthopedics, Obst. & Gynae., Anaesthesiology, Radiodiagnosis are running P.G. courses. There is no Professor in these department.

2. Clinical material is inadequate in terms of Radiological investigations and lab investigations as under:-

<u>Radiological Investigations</u>	O.P.	I.P.	O.P.	I.P.
X-ray	24	24	55	Nil
Ultrasonography	07	06	06	05
Special Investigations				
C.T. Scan	04	05	02	05
<u>Laboratory Investigations</u>				
Biochemistry		167		238
Microbiology		56		100
Serology	31	34	10	10
Parasitology		10		10
Haematology	54	52	78	115
Histopathology		13		25
Cytopathology	14	17	12	08
Others		05		

- 3. Composition and number of unit is not as per Council requirement. There is shortage of 31 beds in paediatrics . There is shortage of 01 unit in department of Orthopedics. Number of teaching units is 28. There is shortage of 31 beds in paediatrics. There is shortage of 01 unit in department of Orthopedics. There are 1 to 5 beds extra in department of Skin & V.D., psychiatry, Surgery, Ophthalmology & E.N.T. Department of Obst. & Gynae has two units extra than the requirement. Composition and number of units is not as per council requirement.
- 4. R.H.T.C. & U.H.C do not have staff as per Council recommendation. No Assistant Professor having MD (PSM) qualification has been posted. Lecture hall cum seminar room is not furnished. No audiovisual aids have been provided and they are brought by the PSM department at the time of the visit. No beds have been provided. There is no labour room. Delivery services are not provided at UHC. Duty rosters and records of various activities and investigations are not maintained properly also at UHC.
- 5. Radiological facilities: Protective measures as per BARC specification are not followed.
- 6. C.S.S.D has no ETO. Receiving and distribution points are not separate. Collection of biological waste is not as per guidelines.
- 7. There is no canteen facility for patients.
- 8. Paramedical staff is not adequate as under:

Laboratory Technicians: 56

Laboratory Assistants: Nil

Laboratory Attendants: 10
- 9. Common rooms for boys and girls are not available.
- 10. Statistical unit has not been established.
- 11. No Central workshop is available.
- 12. The registration counters are managed by ward attendants .There is no Medical record department and no qualified Medical record officer. I.C.D-X classification of diseases is not followed.
- 13. Following deficiencies have been observed in the infrastructure of pre clinical departments:-

- The demonstration rooms are having capacity varying from 25 to 50 which is less than required.
- No subscription for journals has been paid this year
- There are 28 tables in 14 O.T.s which is not as per Council norms.

14. Other deficiencies/remarks pointed out in the main report.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that the teaching faculty is deficient by 35.5% and the residents is deficient by 11.9% even for the existing intake of 90 seats as under:-

1. (a) The shortage of teaching faculty is 35.5% (i.e. 80 out of 225) as under:-

(i)	Professor	07	(Pathology -1, Microbiology -1, Paediatrics -1, Orthopaedics -1, Obst. & Gynae. -1, Anaesthesia -1 & Radio Diagnosis -1)
(ii)	Associate Prof.	23	(Anatomy -1, Biochemistry -1, Forensic Medicine -1, General Medicine -1, paediatrics -2, Psychiatry -1, General Surgery -5, Orthopaedics -2, Obst. & Gynae.-4, Anaesthesia -2, Radio Diagnosis -2 & Dentistry -1)
(iii)	Assistant Prof.	41	(Anatomy -2, Lect. Biophysics -1, Biochemistry -1, Pharmacology -2, Forensic Medicine -1, Community Medicine -6, General Medicine -1, Paediatrics -2, TB & Chest -1, Skin & VD -1, Psychiatry -1, General Surgery -6, Orthopaedics -3, Obst & Gynae. -6, Anaesthesia -4, Radio Diagnosis -2 & Dentistry -1)
(iv)	Tutor	09	(Anatomy -2, Physiology -2, Pharmacology -1 Forensic Medicine -1 & Community Medicine -3)

(b) The shortage of Residents is 11.9% (i.e. 14 out of 117) as under:-

(i)	Sr. Resident	6	(TB & Chest -1, Psychiatry -1, Orthopaedics -1, Ophthalmology -1, Anaesthesia -1 & Radio Diagnosis -1)
(ii)	Jr. Resident	8	(TB & Chest -2, Skin & VD -3 & Psychiatry -3)

In view of above and Govt. of India letter dated 15.3.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar v/s UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in Ist MBBS course from 90 to 150 at Darbhanga Medical College, Laheriasarai, Bihar u/s 10A of the I.M.C. Act, 1956.

It was further decided that the institute be directed to remove the deficiency of teaching faculty, Residents, para-medical and nursing personnel, equipment & instrumentation and other infrastructure for existing intake within a period of 1 month and submit the compliance.

46. Increase of MBBS seats from 100 to 150 at Patna Medical College, Patna, Bihar.

Read: The Council Inspectors report (03rd & 04th June, 2008) for grant of letter of permission for increase of MBBS seats from 100 to 150 at Patna Medical College, Patna, Bihar alongwith letter dated 10th June, 2008 from the Secretary (Health Department), Govt. of Bihar.

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 (03rd & 04th June, 2008) alongwith letter dated 10th June, 2008 from the Secretary (Health Department), Govt. of Bihar and noted the following:-

1. (a) The shortage of teaching faculty is 23% (i.e. 58 out of 252)

i)	Professor	1	(TB Chest-1)
ii)	Associate Professor	15	(Physiology-1, FMT-1, Comm. Med.-1, Gen.Medicine-

- 1, Paediatrics-2, Dermatology-1, Gen. Surgery-1, Orthopaedics-3, ENT-1, Ophthalmology-1, OBGY-1, Anaesthesia-1)
- iii) Assistant Professor 42 (Anatomy-3, Physiology-2, Biochemistry-3, Pathology-1, Comm. Med.-3, Gen.Medicine-8, Paediatrics-5, TB Chest-1, Dematology-2, Orthopaedics-2, ENT-1, Ophthalmology-3, OBGY-8)
- (b) Dr. Om Prakash Choudhary, shown as Medical Superintendent is not qualified to hold the post as he possesses 5 years administrative experience against the requirement of 10 years as per Regulations.
2. The furniture in all the hostels is debilitated and needs to be replaced. In the boys hostel, the mess space is available but there is no furniture. A small kitchen is provided. Tiffin services are out sourced while for some students food is prepared in the kitchen.
 3. There is no Band Saw in the Anatomy Department.
 4. In PHC, no lecturer cum medical officer having M.D.{P.S.M.} is available. Lecture hall cum seminar room is not available. No audiovisual aids have been provided and they are brought by the P.S.M. department at the time of the visit. Lecture hall with A.V. aids needs to be provided.
 5. In UHC, no lecturer cum medical officer having M.D.{P.S.M.} is posted. Nil beds have been provided. Delivery services are not available.
 6. Registration counter for O.P.D. and indoor cases is not computerized.
 7. Central sterilization department: There is nil bowl sterilizer, nil Glove inspection machine and nil instrument washing machine in CSSD.
 8. There are 21 OTs having total 33 tables, which is not as per norms.
 9. Other deficiencies pointed out in the inspection report.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that the deficiency of teaching faculty is 22.91% even for the existing intake of 100 seats as under:-

- | | | | |
|-------|-----------------|----|--|
| (i) | Professor | 1 | (TB & Chest -1) |
| (ii) | Associate Prof. | 15 | (Forensic Medicine -1, Community Medicine -1, General Medicine -1, Paediatrics -2, Skin & VD - 1, General Surgery -1, Orthopaedics -3, ENT -1, Ophthalmology -1, Obst & Gynae. -1 & Anaesthesia -1, Pharma. Chemist-1) |
| (iii) | Assistant Prof. | 39 | (Anatomy -2, Physiology -1, Biochemistry -2, Pathology -1, Community Medicine -3, General Medicine -8, Paediatrics -5, TB & Chest -1, Skin & VD -2, Orthopaedics -2, ENT -1, Ophthalmology -3, Obst. & Gynae. -8) |

In view of the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in MBBS course from 100 to 150 at Patna Medical College, Patna, Bihar u/s 10A of the I.M.C. Act, 1956.

It was further decided that the institute be directed to remove the deficiency of teaching faculty, Residents, para-medical and nursing personnel, equipment & instrumentation and other infrastructure for existing intake within a period of 1 month and submit the compliance.

47. Tripura Medical College & Dr. B.R.A.M. Teaching Hospital, Agartala - Renewal of permission for admission of 3rd batch of students for the academic session 2008-09.

Read: The Council Inspectors report (16th & 17th May, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Tripura Medical College & Dr. B.R.A.M. Teaching Hospital, Agartala.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and the Executive Committee of the Council considered the Council Inspectors report (16th & 17th May, 2008) and observed that the Executive Committee at its meeting on 13/14 June 2007, while considering inspection report of the institute had observed the following major deficiencies of teaching faculty and infrastructure as under:

- “ 1. (a) The shortage of teaching staff required at present stage is 6.1% as under:-
- i) Professor- 2 (1 Forensic Medicine & 1 Radio Diagnosis)
 - ii) Associate Professor - 1 (General Surgery)
 - iii) Assistant Professor - 3 (Anatomy-2, Pharma. Chemist-1)
- (b) Out of the 97 faculty required for 1st renewal, 89 new faculty have been appointed after the last inspection.
- (c) Out of 57 resident doctors required, all have been newly appointed and they were not present during the last inspection.
- (d) 70% of the teaching faculty (including Tutors) do not possess the proof of local residence.
2. Clinical Material is inadequate in terms of number of deliveries and caesarian sections, which is inadequate as under:-
- | | Daily Average | Day of Inspection |
|------------------------------|---------------|-------------------|
| Number of normal deliveries | 6/week | 1 |
| Number of caesarian Sections | 6/week | 1 |
3. Buildings: On the Ground floor the Microbiology and Forensic Medicine Department are under construction The first, second and third floors are still to be constructed which will house the departments of Anatomy, Physiology, Biochemistry, Pathology Pharmacology, Community Medicine, Lecture theatres, Examination Halls, Library, administrative block, and offices of all the clinical departments.
4. U.H.C.: No lecturer cum medical office having M.D.{P.S.M.} is posted.
5. Hostels: Total accommodation is available only 120 students against the requirement of 200 at this stage.
6. Residents accommodation is available only 24 residents against the requirement of 75 at this stage.
7. Accommodation is available only 40 nurses which is inadequate at this stage as per Regulations.
8. Other deficiencies as pointed out in the inspection report. ””

In view of these deficiencies, it was decided not to recommend renewal of permission for admission of 2nd batch of 100 students for the academic year 2007-08. This decision was communicated to the Central Govt. vide Council letter dt. 15.06.2008. However, Central Govt. had issued renewal of permission vide its letter dt. 15.07.2008.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and the Executive Committee of the Council while considering the Council Inspectors report (16th & 17th May, 2008) and noted the following:-

- 1.a) The following teachers cannot be considered eligible due to the reasons mentioned below:-

S.No.	Name	Designation	Department	Remarks
1.	Dr.Nimai Chand Luwang	Professor	Comm.Med.	He possesses only 3 years 7 months experience as Asstt. Prof. against the requirement of 5 years as per Regulations. Hence, not eligible.
2.	Dr.Nakul Hazarika	Assoc.Prof.	Comm. Med.	He has not shown any experience as Resident in a medical institute against the requirement of 3 years as per

				regulations. Hence not eligible.
3.	Dr.Laishram Deben Singh	Professor	Physiology	He possesses only 4 years experience as Asstt. Prof. against the requirement of 5 years as per Regulations. Hence, not eligible.
4.	Dr.Lalit Kishore Sharma	Professor	Anatomy	His date of birth is 9 th May, 1943. Hence has crossed the age of 65 years which is maximum permissible as per Regulations.
5.	Dr.J.C.Pandey	Assoc.Prof.	Anatomy	He possesses only 4 years 7 months experience as Asstt. Prof. against the requirement of 5 years as per Regulations. Hence, not eligible.
6.	Dr.Tarunendra Nath Lahiri Mazumdar	Professor	Medicine	He has not shown any experience as Asstt. Prof. in a medical institute against the requirement of 5 years as per regulations. Hence not eligible.
7.	Dr.Bijay Kumar Saumandal	Professor	Obst. & Gynae.	He possesses only 2 years experience as Asstt. Prof. against the requirement of 5 years as per Regulations. Hence, not eligible.
8.	Dr.Bratati Lahiri Mazumdar	Assoc.Prof.	Radiology	She has not shown any experience as Asstt. Prof. in a medical institute against the requirement of 5 years as per regulations. Hence not eligible.

(b) In view of above, the shortage of teaching faculty is 13% (i.e. 15 out of 116) as under

i) Professor 3 (1 Forensic, 1 Radiology, 1 Comm. Med.)

ii)Associate Professor 9 (1-Anatomy, 1 Physiology, 1-Microbiology, 2 Medicine, 1 Anaesthesia, 1 Dentistry, 1 Obst. & Gynae, 1 Radiology)

iii)Assistant Professor 3 (1Epidem cum Lecturer, 1 RHTC, 1UHC)

2. Clinical Material is inadequate in terms of OPD attendance which is 675 (daily average).
3. RHTC Melaghar is on lease for 5 years which is not as per norms. In RHTC no lecturer cum medical officer having M.D.{P.S.M.} is available. No audiovisual aids have been provided. Labour room and minor OT are not available.
4. Urban Health Centre is on lease for 2 years which is not as per norms. No lecturer cum medical officer having M.D.{P.S.M.} is available.
5. There is no post-operative ward.
6. Only 12 flats are available within the campus for the teaching faculty which is inadequate against the requirement of 36 at this stage as per Regulations. No accommodation is available for non-teaching and class-IV employees.
7. In Anatomy Department, Band saw is non functional.
8. In Radio-Diagnosis department, only 2 static units are available. There is no IITV.
9. There is no independent CSSD.
10. Books in the departmental libraries of TB & Chest, Skin & VD, Psychiatry, ENT, Ophthalmology, Radio-Diagnosis and Anaesthesia are inadequate.
11. Other deficiencies as pointed out in the inspection report.

In view of above and persistent and continuing deficiencies of teaching faculty, clinical material and other infrastructure which have not been rectified in spite of an opportunity being given by the Central Govt. in the academic year 2007-08 and Govt. of India letter dt. 15/3/2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council decided to recommend to Central Govt. not to renew the permission for admission of 3rd batch of students for the academic session 2008-2009 at Tripura Medical College & Dr. B.R.A.M. Teaching Hospital, Agartala.

48. Bidar Institute of Medical Sciences, Bidar – Renewal of permission for admission of 2nd batch of students for the academic session 2008-09.

Read: The compliance verification inspection report (04th June, 2008) alongwith Council Inspectors report (17-18th April, 2008) for renewal of permission for admission of 2nd batch of students for the academic session 2008-2009 at Bidar Institute of Medical Sciences, Bidar and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (4th June, 2008) alongwith Council Inspectors report (17-18th April, 2008) and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 2nd batch of 100 (One Hundred) MBBS students at Bidar Institute of Medical Sciences, Bidar for the academic session 2008-09.

49. Shimoga Institute of Medical Sciences, Shimoga – Renewal of permission for admission of 2nd batch of students for the academic session 2008-09.

Read: The Compliance Verification Inspection report (4th June, 2008) alongwith Council Inspectors report (4-5th April, 2008) for renewal of permission for admission of 2nd batch of students for the academic session 2008-2009 at Shimoga Institute of Medical Sciences, Shimoga and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (4th June, 2008) alongwith Council Inspectors report (4-5th April, 2008) and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 2nd batch of 100 (One Hundred) MBBS students at Shimoga Institute of Medical Sciences, Shimoga for the academic session 2008-09.

50. Raichur Institute of Medical Sciences, Raichur – Renewal of permission for admission of 2nd batch of students for the academic year 2008-2009.

Read: The Council Inspectors report (06th & 07th June, 2008) for renewal of permission for admission of 2nd batch of students for the academic session 2008-2009 at Raichur Institute of Medical Sciences, Raichur.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the Council Inspectors report (6th & 7th June, 2008) and noted that the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council at its meeting held on 13/14 June 2007, while considering inspection report of the institute had observed the following major deficiencies of teaching faculty and infrastructure for the academic year 2007-08 as under:

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

(a) The shortage of teaching faculty is 25.45% as under:-

(i)	Professor	02	(Physiology –1 & Biochemistry –1)
(ii)	Assoc. Prof.	04	(Anatomy –2, Physiology –1 & Radio diagnosis –1)
(iii)	Asst. Prof.	08	(Anatomy –3, Physiology –1, General Medicine –2, Ophthalmology –1 & Radio diagnosis –1)

(b) The shortage of Residents is 29.54% as under :-

- (i) Sr. Resident 09 (General Medicine –2, Paediatrics –1, Orthopaedics –1, ENT –1, Obst. & Gynae. –2, Anaesthesia –2)
 - (ii) Jr. Resident 04 Orthopaedics –1, ENT –1 & Obst. & Gynae. –2)
- (c) Dr. T.M. Nataraj [M.S. (Orthopaedics)], shown the Medical Superintendent is not qualified to hold the post as he has only 7 years administrative experience against the requirement of 10 years as per Regulations.
2. Clinical Material is inadequate in terms of radiological & Laboratory investigations. The Central Lab. runs services for only clinical Pathology and Biochemistry, Microbiology and Histopathology services are not available The clinical load in the laboratories is inadequate.
3. Hostels are under construction and not yet functional.
4. Other deficiencies as pointed out in the inspection report. ””

In view of these deficiencies, it was decided to recommend not to issue letter of permission for establishment of new medical college of 100 students for the academic year 2007-08. This decision was communicated to the Central Govt. vide Council letter dt. 15.06.2007. However, Central Govt. had issued letter of permission vide its letter dt. 15.07.2007.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and the Executive Committee of the Council considered the Council Inspectors report (06th & 07th June, 2008) and observed as under:-

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

(a) The shortage of teaching faculty is 16.49% (i.e. 16 out of 97) as under:-

- (i) Professor 03 (Anatomy-1,Biochemistry-1, Pharmacology-1)
- (ii) Associate Prof. 07 (Anatomy-2, Physiology-1, Pathology-1,Forensic Medicine-1, Anaesthesia-1,Radiodiagnosis-1)
- (iii) Assistant Prof. 06 (Anatomy-2, Pharma-Chem-1, Community Medicine-2,TB & Chest-1)

(b) The shortage of Residents is 18.96 % (i.e. 11 out of 58) as under:-

(i)	Sr. Resident	04	(Surgery-1,Ophthalmology-1,Anaesthesia-1,Radiodiagnosis-1)
(ii)	Jr. Resident	07	(TB & Chest-1,Dermatology-1,Psych-1, Ortho-2, ENT-2)

2. Distribution of beds is deficient by 22 beds as under:-

Speciality	Required Beds/Units	Present Beds/Units	Deficiency if any
Medicine & Allied Specialities			
General Medicine	85	76/3	09
Surgery & Allied Specialities			
General Surgery	90	84/3	06
Orthopaedics	38	35/1	03
Ophthalmology	13	11/1	02
ENT	13	11/1	02
Total:			22

3. Clinical Material is inadequate as under:-

	Daily Average		Day of Inspection	
Bed occupancy%	81 %		58 %	
<u>Radiological Investigations</u>	O.P.	I.P.	O.P.	I.P.
X-ray	51	19	47	17

Ultrasonography	14	06	13	04
Special Investigations	01	01	01	-
C.T. Scan	-	-	-	-

4. In OPD: Specialities of only Medicine and Surgery have been provided teaching area with capacity of 30 students each.
5. In Wards : No ward is provided duty doctor room, nurse duty room, nursing station, pantry, examination / procedure room, teaching area. Side laboratory is provided. No clinical demonstration areas have been provided in the wards. There is no seminar hall in the major departments. Teaching areas in the OPDs are inadequate. Audiometry room in ENT is non-Air-conditioned.
6. RHTC is under the control of the Health Department of Government of Karnataka. The P.S.M. department does not organize teaching programmes and field visits at present. Other clinical departments like Medicine, Paediatrics, Obstetrics & Gynaecology also do not participate in the outreach teaching programmes. No lecturer cum medical officer having M.D.{P.S.M.} is not posted so far. Students are not posted. Separate blocks for accommodating boys & girls in PHC are not available. Messing facilities are not available. Lecture hall cum seminar room is not available. No audiovisual aids have been provided.
7. U.H.TC. is under financial and administrative control of Health Department of State Government.
8. Registration and Medical Record Section: In O.P.D., it is not computerized.
9. Central Casualty Service: Only 8 beds are available in casualty area against the requirement of 20 beds as per Regulations.
10. Central sterilization department: No bowl sterilizer, No Glove inspection machine and no instrument washing machine are available in CSSD.
11. Kitchen: There is no provision to supply special diet as recommended by physician. There is no post of Dietician.
12. Paramedical staff is grossly inadequate as under:-
- Laboratory Technicians

:

10
- Laboratory Assistants

:

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- Laboratory Attendants

:

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13. Nursing Staff is grossly inadequate as under:-
- Nursing Superintendent

:

1
- Deputy Nursing Superintendent

:

-
- Matron

:

3
- Asstt. Nursing Superintendent

:

2
- Nursing Sisters

:

--
- Staff nurses

:

90
14. Pharmacology Department: In the Clinical Pharmacology & Pharmacy laboratory, chemicals, reagents and the required equipments are not available. There is a no research laboratory.
15. Pathology Department: There are 2 demonstration rooms each having capacity of 60 seats ,out of which only one room is furnished. Hispathology laboratory has no provision for artificial light. Clinical Pathology/Haematology laboratory has no provision for artificial light. Service laboratory for histopathology, cytopathology and haematology work are available however the work is very less. Histokinette is not available.
16. Microbiology Department: Practical laboratory has no provision for artificial light and preparation room. Service laboratories for serology, virology, parasitology, mycology and tuberculosis are not functional. No Immunology work is carried out in Serology laboratory. There is no research laboratory. They do not participate in hospital work. Bacterial Cultures are not done.
17. Community Medicine Department: There are 2 demonstration rooms each having capacity of 60 seats, out of which only one room is furnished. There is no research laboratory.
18. Departmental libraries have inadequate books as follows: Medicine and allied: 80, General Surgery and allied -30, Radio-Diagnosis-4, Anaesthesia- 10 & Obst. & Gynae. - 10
19. Other deficiencies/remarks in the main report.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council also observed that at its meeting held on 29.12.2007 while considering the compliance verification inspection report of the institute had observed that the applicant has failed to fulfill the mandatory and statutory precondition at Sr. No. 2(5) of the Qualifying Criteria of owning & managing of a functional hospital of not less than 300 beds, laid down in the Establishment of Medical College Regulations, 1999 decided to recommend to the Central Govt. to recall the Letter of Permission dated 13.07.2007 issued by the Central Govt. for establishment of new medical college at Raichur.

In view of above and persistent and continuing deficiencies of teaching faculty, clinical material and other infrastructure which have not been rectified in spite of an opportunity being given by the Central Govt. in the academic year 2007-08 and Govt. of India letter dt. 15/3/2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council decided to recommend to Central Govt. not to renew the permission for admission of 2nd batch of students for the academic session 2008-2009 at Raichur Institute of Medical Sciences, Raichur.

51. Rajiv Gandhi Institute of Medical Sciences, Kadapa - Renewal of permission for admission of 3rd batch of students for the academic session 2008-09.

Read: The Council Inspectors report (6th & 7th June, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Rajiv Gandhi Institute of Medical Sciences, Kadapa along with letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (6th and 7th June, 2008) along with letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 150 (One Hundred Fifty) MBBS students at Rajiv Gandhi Institute of Medical Sciences, Kadapa for the academic session 2008-09.

52. Index Medical College Hospital & Research Centre, Indore - Renewal of permission for admission of 2nd batch of students for the academic session 2008-2009.

Read: The Compliance Verification Inspection report (27th May, 2008) alongwith Council Inspectors report (8-9 May, 2008) for renewal of permission for admission of 2nd batch of students for the academic session 2008-2009 at Index Medical College Hospital & Research Centre, Indore and letter dated 3.6.2008 received from the Principal of the Institute.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the Compliance Verification Inspection report (27th May, 2008) alongwith Council Inspectors report (8-9 May, 2008) and letter dated 3.6.2008 received from the Principal of the Institute and noted the following:-

1. (a) The following teachers cannot be considered due to reasons mentioned below:-

Sl.No.	Name	Designation	Department	Remarks
1.	Dr. Anil Kr. Bidwai	Associate Prof.	Biochemistry	Dr. Anil Bidwai is not accepted because he is MSc Science Faculty, PH.D Medical faculty. Not counted.
2.	Dr. Shiva Prakash	Asstt. Prof.	Biochemistry	Dr. Shiva Prakash is not accepted because he is MSc Science Faculty, PH.D Medical faculty. Not counted.
3.	Dr. Kamayani Despandey	Assoc. Prof.	Pathology	Part-time

4.	Dr. Quazi Syed Nazimuddin	Prof.	Community Medicine	Part time
5.	Dr. Tara Chand Meshram	Asstt. Prof.	Community Medicine	Part-time
6.	Dr. Ashok Talreja	Asstt. Prof.	Microbiology	Dr. Ashok Talreja, Asstt. Prof. is not counted because there is no date of relieving in the affidavit submitted by him.

- (b) The following teachers have been found to be working at more than one medical college simultaneously:

- (1) Dr. Shailesh Kumar Singh, Assoc. Prof. of Anatomy

Name of the college	Date of Joining	Date of Inspection
1. Adesh Instt. of Medical Sciences & Research Instt. Bhatinda	26.7.2007	4.4.2008
2. Hi-Tech Medical College, Bhubaneswar	26.4.2008	29.4.2008
3. Index Medical College & Research Center	1.6.2007	27.5.2008
4. Narayan Medical College & Hospital, Sasaram	26.5.2008	30.5.2008

- (c) In relation to certain Declaration Forms submitted on behalf of the medical teachers and endorsed by the Principal of the medical college, it was observed/found that teaching experience shown in those Declaration Forms is incorrect and in certain cases, it was seriously doubted. The office of the Council had undertaken the exercise of verifying the individual particulars regarding the claimed teaching experience from the Medical institutions concerned and found their claim to be fake. The following teaching faculty cannot be considered as the experience certificates submitted by them are forged as shown below:

S.No.	Name	Designation	Department	Remarks
1.	Dr. Katyayan Mishra	Assoc. Prof.	Dermatology	In his declaration form, he has claimed that he has worked at R.D. Gardi Medical College, Ujjain from 5.10.2002 to 2.6.2007 as Asstt. Prof. in the department of Dermatology. On verification, the Medical Director of R.D. Gardi Medical College, Ujjain vide its letter dt. 16.5.2008 has informed that he has worked at Asstt. Prof. in the department of Dermatology from 1.11.2001 to 31.10.2005 only. Thus, he has submitted a false and forged experience certificate and therefore cannot be accepted as a teacher.
2.	Dr. Surender Pratap Mishra	Assoc. Prof.	Biochemistry	In the Declaration Forms submitted by the institute and counter signed by the Dean, he has stated that he is working at NSCB Medical College, Jabalpur as Asstt. Prof. from 21.2.2000 to 30.4.2008. He has also presented himself at the inspection of Institute of Medical Sciences, BHU, Varanasi on 30.5.2008 wherein

				in the Declaration Forms submitted by IMS, BHU, it is stated that he is working at NSCB Medical College, Jabalpur for a period of 21.1.2003 to 24.2.2007. It is also observed that the photographs and the signatures on the two declaration forms submitted in the name of Dr. Surender Pratap Mishra are different.
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(d) The following teachers cannot be considered as they have been found working in dental colleges as stipulated by the Dental Council of India vide their letter dated 13.6.2008:-

Name	Designation	Department	Remark
Dr. Pradeep Singh	Asstt.Prof.	Anatomy	Working at ITS Dental College.
Dr. Devender Kumar Lodi	Asstt.Prof.	Anatomy	Working at Hitkarni Dental College.
Dr. K.S. Vasiah	Prof.	Anatomy	Working at Teerthankar Mahavir Dental College
Dr. C.S. Tagoji	Professor	Physiology	Working at Teerthankar Mahavir Dental College
Dr. J. Kashyap	Assoc.Prof.	Pharmacology	Working at Hitkarni Dental College.
Dr. Purnima Raj	Asstt.Prof.	Pharmacology	Working at Chhattisgarh Dental College.

(e) In view of above, the shortage of teaching staff is as under:-

- (I) The shortage of teaching faculty is 18% (i.e. 24 out of 129) as under:-

i) Professor 3 (Pharmacology-1, General Surgery-1, Physiology-1)

ii) Associate Prof. 14 (Anatomy-3, Physiology-3, Biochemistry -1, Pathology – 1, Forensic Medicine -2, Pharmacology-1 General Medicine-1, Radio-Diagnosis-1, Dermatology 1)

iii) Assistant Prof. 7 (Anatomy-3, Physiology-2, Community Medicine-1, TB & Chest-1)
- (II) The shortage of Residents is 6.57% (i.e. 5 out of 76) as under:-

i) Sr. Resident 5 (Paediatrics-1, General Surgery-2, OBGY-2)

2. (a) Available clinical material is inadequate as under:-

	Daily Average	Day of Inspection
O.P.D. attendance	595	391
Bed occupancy%	70%	57.5%
Operative work		
Number of major surgical operations	06	07
Number of minor surgical operations	15	07
Number of normal deliveries	01	-
Number of caesarian Sections	0-1	-
<u>Radiological Investigations</u>		
X-ray	65	60
Ultrasonography	25	12
Special Investigations	4	-
C.T. Scan	-	-

- The clinical material was low in terms of OPD attendance (391) and bed occupancy (57.5%) on the day of inspection.
- In Medicine ward, case sheets were found with the complaints of pain abdomen, general weakness, giddiness etc. which did not warrant admission. In Paediatrics ward, children in

- the age group 8 to 12 years were admitted who did not have any complaint. No infants or pre-school children were seen in the ward. Obst. & Gynae. labour room was empty.
- 203 patients - i.e. 86% of the patients in the hospital - were admitted only on 26/05/08 i.e. a day before the inspection.
 - In the departments of Ophthalmology and ENT, it was found that the admission/discharge registers were either not available or were incomplete viz., there was either no entry of patients name or date of admission.
 - Although case sheets were reported complete and were duly signed by the duty doctors, treatment details in most of the cases were not written.

(b) OPD attendance and bed occupancy on the day of inspection is as under:-

S.No.	Name of Dept.	OPD Attendance	In-door Beds	Occupancy
1.	Gen. Medicine	80	100	55
2.	Paediatric	40	45	25
3.	Psychiatry	10	07	04
4.	Dermatology	20	08	03
5.	TB & Chest	25	15	09
6.	Gen. Surgery	65	105	60
7.	Orthopaedics	30	40	25
8.	Ophthalmology	35	15	11
9.	ENT	30	15	11
10.	OBGY	56	65	36
	Total	391	415	239 (57.5 %)

- 3. Only 8 residential quarters are available for teaching faculty within the campus against the requirement of 26 at this stage.
- 4. Other deficiencies as pointed out in the inspection report.

In view of above and Govt. of India letter dt. 15/3/2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council decided to recommend to Central Govt. not to renew the permission for admission of 2nd batch of students for the academic session 2008-2009 at Index Medical College Hospital & Research Centre, Indore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council were, therefore, clearly of the view that the Council should take steps for referring the above case to the Police authorities for registration of FIR and conducting investigation in the above case. It was also observed that in the complaint to be sent to the Police authorities, it should also be clearly requested that in the above case if there is a collusion and conspiracy of such a person with the management of the college, the necessary action should also be taken against the management of the college. It was further decided that appropriate action be taken against this Doctor and the Dean/Principal in accordance with Professional Conduct (Etiquette and Ethics) Regulations 2002.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council also decided that including recommendation for not recommending the renewal of permission for admission of 2nd batch of students, the Central Government may consider debarring this college from any further consideration u/s 10A of the Act for a period of 2-3 years and for any further appropriate action by the Central Government to curb the menace of submitting false declaration forms.

53. Shadan Institute of Medical Sciences, Research Centre & Teaching Hospital, Peerancheru, – Renewal of permission for admission of 4th batch of students for the academic session 2008-09.

Read: The Compliance Verification Inspection report (31st May, 2008) alongwith Council Inspectors report (17-18th April, 2008) for renewal of permission for admission of 4th batch of students for the academic session 2008-2009 at Shadan Institute of Medical Sciences, Research Centre & Teaching Hospital, Peerancheru.

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 (31st May, 2008) alongwith Council Inspectors report (17-18th April, 2008) and observed as under:-

(1) In relation to certain Declaration Forms submitted on behalf of the medical teachers and endorsed by the Principal of the medical college, it was observed/found that teaching experience shown in those Declaration Forms is incorrect and in certain cases, it was seriously doubted. The office of the Council had undertaken the exercise of verifying the individual particulars regarding the claimed teaching experience from the Medical institutions concerned and found their claim to be fake. The following teaching faculty cannot be considered as the experience certificates submitted by them are forged as shown below:

S.No.	Name	Designation	Department	Remarks
1.	Dr. Syed Parween Mazher Ali	Asstt. Prof.	Biochemistry	In his declaration form, she has claimed that she has worked at Maharashtra Instt. of Medical Sciences & Research, Latur from 9.9.1993 to 9.1.1998 as Asstt.Prof. in the department of Biochemistry. On verification, the Dean of Maharashtra Instt. of Medical Sciences & Research, Latur vide his letter dt. 19.5.2008 has informed that she has worked as Asstt. Prof. in the department of Pathology from 9.9.1993 to 8.9.1996 only. Thus, he has submitted a false and forged experience certificate and therefore cannot be accepted as a teacher.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council were, therefore, clearly of the view that the Council should take steps for referring the above case to the Police authorities for registration of FIR and conducting investigation in the above case. It was also observed that in the complaint to be sent to the Police authorities, it should also be clearly requested that in the above case if there is a collusion and conspiracy of such a person with the management of the college, the necessary action should also be taken against the management of the college. It was further decided that appropriate action be taken against this Doctor and the Dean/Principal in accordance with Professional Conduct (Etiquette and Ethics) Regulations 2002.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that the rest of the infrastructure including teaching faculty, residents, clinical material, teaching beds, library, hostels and other infrastructural facilities are adequate.

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. to renew the permission for admission of 4th batch of 150 (One Hundred Fifty) MBBS students at Shadan Institute of Medical Sciences, Research Centre & Teaching Hospital, Peerancheru for the academic session 2008-09.

54. Establishment of a new medical college at Kanpur, U.P by Rama Educational Society, Kanpur, Uttar Pradesh.

Read: The Compliance Verification Inspection report (07th June, 2008) alongwith Council Inspectors report (22-23 April, 2008) for grant of Letter of Permission for establishment

of new medical college at Kanpur, U.P by Rama Educational Society, Kanpur, Uttar Pradesh u/s 10(A) of the IMC Act, 1956.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and the Executive Committee of the Council considered the Compliance Verification Inspection report (7th June, 2008) alongwith Council Inspectors report (22-23 April, 2008) and noted the following:-

1. (a) The following faculty has not been counted.

Sr. No.	Name	Designation	Department	Remarks
1.	Dr. Ghan Shyam Dwivedi	Assoc. Prof.	Anatomy	No proof of experience as Asstt./Assoc. Prof.
2.	Dr. Rakesh Sharma	Asstt. Prof.	Anatomy	M.Sc. from science faculty.
3.	Dr. Anamika Gaharwar	Asstt. Prof.	Anatomy	No proof of residence.
4.	Dr. Chitra Srivastava	Lect.(Biophysics)	Physiology	Does not possess the required academic qualification and no proof of residence.
5.	Dr. K.K. Kshitiz	Asstt. Prof.	Biochemistry	No proof of residence.
6.	Dr. Vivekanand	Asstt. Prof.	Biochemistry	Absent.
7.	Ms. Juhi Rastogi	Tutor	Biochemistry	M.Sc. from science faculty.
8.	Dr. S.N. Singh	Professor	Pathology	Absent
9.	Dr. Himani	Tutor	Microbiology	No proof of residence.
10.	Dr. Rohit Mishra	Tutor	Forensic Medicine	No proof of residence.
11.	Dr. R.S. Gangwar	Sr. Resident	General Medicine	Absent
12.	Dr. Satish Chandra	Asstt. Prof.	General Surgery	Absent
13.	Dr. V.K. Mishra	Asstt. Prof.	Orthopeadics	Absent
14.	Dr. A.S. Pandey	Sr. Resident	Orthopeadics	Absent
15.	Dr. Rohit Mehrotra	Asstt. Prof.	ENT	Absent
16.	Dr. Manjula Pandey	Professor	Obsy & Gynae.	Working on hononary basis
17.	Dr. V.D. Deshpandedy	Assoc. Prof.	Obst. & Gynae.	Absent
18.	Dr. Stuti Mishra	Asstt. Prof.	Obst. & Gynae.	No proof of residence
19.	Dr. Rohit Agarwal	Sr. Resident	Anaesthesia	No MBBS degree available.

- (b) The following teachers have been found to be working at more than one medical college simultaneously:

1. Dr.Ghanshyam Dwivedi, Assoc.Prof. of Anatomy

Name of the college	Date of Joining	Date of Inspection
1. Mamta Medical College, Khammam	1.10.2005	8.4.2008
2. Rama Medical College & Hospital, Kanpur	25.1.2008	7.6.2008

2. Dr.Anjoo Yadav, Asstt.Prof. of Anatomy

Name of the college	Date of Joining	Date of Inspection
1. Rohilkhand Medical College & Hospital, Bareilly	19.10.2007	1.4.2008
2. Rama Medical College & Hospital, Kanpur	16.2.2008	7.6.2008

- (c) In relation to certain Declaration Forms submitted on behalf of the medical teachers and endorsed by the Principal of the medical college, it was observed/found that teaching experience shown in those Declaration Forms is incorrect and in certain cases, it was

seriously doubted. The office of the Council had undertaken the exercise of verifying the individual particulars regarding the claimed teaching experience from the Medical institutions concerned and found their claim to be fake. The following teaching faculty cannot be considered as the experience certificates submitted by them are forged as shown below:

S.No.	Name	Designation	Department	Remarks
1.	Dr. Salil Srivastava	Assoc. Prof.	Pharmacology	In his declaration form, he has claimed that he has worked at Era Lucknow Medical College, Lucknow from 12.2.2000 to 4.3.2002 as Asstt.Prof. in the department of Pharmacology. On verification, the Principal of Era’s Lucknow Medical College, Lucknow vide its letter dt. 23.5.2008 has informed that he has not worked at their institute. Thus, he has submitted a false and forged experience certificate and therefore cannot be accepted as a teacher.

(d) In view of above, the shortage of teaching staff is as under:-

- (a) Faculty more than 20% (i.e. 13 out of 66) as under:-

(i) Prof. : Nil
(ii) Assoc. Prof. : 04 (Anatomy 2 & Obst. & Gynae. 1, Pharmacology 1)
(iii) Asstt. Prof. :07 (Anatomy -2, Lect,(Bio-Phy.) -1, Biochemistry -1, General Surgery -1, ENT -1, Obst. & Gynae. -1)
(iv) Tutor : 02 (Microbiology -1 & Forensic Medicine -1)

(b) Resident 13.95% (i.e. 6 out of 43) as under:-

(i) Sr. Resident : 04 (General Medicine -1, Orthopaedics -1, Radio diagnosis -1 & Anaesthesia -1)
(ii) Jr. Resident : 02 (General Medicine -1, & Orthopaedics -1)

2. Clinical material is inadequate as under:-
 - * Though the institution has claimed 93% bed occupancy on the day of inspection, on scrutiny, it was found that the bed occupancy was only 55%.
 - * 35-40% of the patients did not required hospitalization.
 - * Variety of clinical material was inadequate (in Medicine ward patients with symptoms of headache, backache and GI upset were admitted, whereas in General Surgery ward, most of the patient had Hernia and Hydrocele). The patients in Surgery ward wards were made to over stay beyond the required period. In Paediatrics ward 40% of the patient were diagnosed as UTI, GI upset and generalized weakness, which did not warrant hospitalization.
 - * Some of the patients in the major departments did not merit admission. The school children were brought in the Paediatrics OPD and were also admitted in the Paediatrics ward without any ailments. The patients in surgery department were retained without any apparent reasons.
 - * Some of the case sheets did not show any treatment note.
 - * Wards did not have the facilities for emergency resuscitation.
 - * The ward staff nurses did not appear to be trained to provide medical care and maintain records. Nursing duties were performed by Attendance/untrained staff.
3. Other deficiencies as pointed out in the inspection report.

In view of above and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Kanpur, U.P by Rama Educational Society, Kanpur, Uttar Pradesh u/s 10(A) 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 were, therefore, clearly of the view that the Council should take steps for referring the above case to the Police authorities for registration of FIR and conducting investigation in the above case. It was also observed that in the complaint to be sent to the Police authorities, it should also be clearly requested that in the above case if there is a collusion and conspiracy of such a person with the management of the college, the necessary action should also be taken against the management of the college. It was further decided that appropriate action be taken against this Doctor and the Dean/Principal in accordance with Professional Conduct (Etiquette and Ethics) Regulations 2002.

55. Establishment of New Medical College at Kozhikode, Calicut by Kunthiharuvai Memorial Charitable Trust, Calicut (Kerala).

Read: The Council Inspectors report (30th & 31st May 2008) for grant of Letter of Permission for establishment of new medical college at Kozhikode, Calicut by Kunthiharuvai Memorial Charitable Trust, Calicut (Kerala) u/s 10(A) 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 (30th & 31st May 2008) and decided to recommend to the Central Govt. to issue Letter of Permission for establishment of new medical college at Kozhikode, Calicut by Kunthiharuvai Memorial Charitable Trust, Calicut (Kerala) with an annual intake of 100 (One Hundred) MBBS students for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

56. Establishment of a new medical college at Jhalawar, Rajasthan by Govt. of Rajasthan.

Read: The Council Inspectors report (6th & 7th June 2008) for grant of Letter of Permission for establishment of new medical college at Jhalawar, Rajasthan by Govt. of Rajasthan u/s 10(A) of the IMC Act, 1956 along with letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (6th & 7th June 2008) along with letter dated 15.7.2004 from 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 establishment of new medical college at Jhalawar, Rajasthan by Govt. of Rajasthan with an annual intake of 100 (One Hundred) MBBS students for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

57. Establishment of New Medical College at Jamuhar Distt. Rohtas, Bihar by Deo Mangla Memorial Trust, Rohtas, Bihar.

Read: The Council Inspectors report (30th & 31st May 2008) for grant of Letter of Permission for establishment of new medical college at Jamuhar Distt. Rohtas, Bihar by Deo Mangla Memorial Trust, Rohtas, Bihar u/s 10(A) of the IMC Act, 1956.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the Council Inspectors report (30th & 31st May 2008) and noted the following:-

1. (a) The following teachers have been found to be working at more than one medical college simultaneously:

(1). Dr.Shailesh Kumar Singh, Assoc.Prof. of Physiology

Name of the college	Date of Joining	Date of Inspection
1. Adesh Instt. of Medical Sciences & Research Instt. Bhatinda	26.7.2007	4.4.2008
2. Hi-Tech Medical College, Bhubaneswar	26.4.2008	29.4.2008
3. Index Medical College & Research Center	1.6.2007	27.5.2008
4. Narayan Medical College & Hospital, Sasaram	26.5.2008	30.5.2008

(b) In view of above, the shortage of teaching Faculty is 32.72% (i.e. 18 out of 55) as under:-

Professor	2	Gen Medicine 1,Gen Surgery 1
Associate Professor	8	Anatomy 1,Physiology 1, Biochemistry 1,Pharmacology 1, Pathology 1, Orthopedics 1, Radiodiagnosis 1, Anaesthesia 1
Assistant Professor	6	Biochemistry 1, Lecturer Bio Physics 1, OBGY 1, Anaesthesia 1, Radiodiagnosis 1,Dentistry 1
Tutor	2	Pathology 1,Microbiology1,

(b) Resident 30.95% (i.e.13 out of 42)

Sr. Resident	7	Gen Medicine 3,Gen Surgery 1, Ophthalmology 1, OBGY 1, Anaesthesia 1
Jr. Resident	6	Gen Medicine 1,Paediatrics 2, Ophthalmology 1, OBGY 2,

2. Clinical material is inadequate as under:

	Daily Average		Day of Inspection	
O.P.D. attendance	200-250		173	
Casualty attendance	1-2		01	
No. of admission/discharge	10/07		05/03	
Bed occupancy%	20%		25%	
Operative work				
Number of major surgical operations	2-3		02	
Number of minor surgical operations	10-12		05	
Number of normal deliveries	Nil		nil	
Number of caesarian Sections	nil		nil	
<u>Radiological Investigations</u>	O.P.		O.P.	I.P.
X-ray	30	15	02	nil
Ultrasonography	23	04	03	nil
Special Investigations	nil	nil	nil	nil
C.T. Scan	nil	nil	nil	nil
<u>Laboratory Investigations</u>				
Biochemistry	80	28	08	01
Microbiology	nil	nil	nil	nil
Serology	nil	nil	nil	nil
Parasitology	nil	nil	nil	nil
Haematology	80	30	17	03
Histopathology	nil	nil	nil	nil
Cytopathology	Nil	Nil	Nil	Nil
Others	-	-	-	-

- Clinical material is grossly inadequate in terms of OPD attendance, casualty attendance, no of admission / discharge, operative work, radiological investigation & laboratory investigations. No deliveries (normal as well as caesarian. section) are being conducted in the hospital.

- There is no facility to carry out Microbiology investigations.
 - There is no facility for histopathology & cytopathology investigations
3. Dr. K.D.Sinha, Asstt. Prof. is shown as medical Superintendent but possess the total Administrative experiences of only 3½ yrs, therefore not eligible to hold the post of medical superintendent.
 4. Medical college building and hospital building are under construction.
 5. In Central library, the number of journals available are only 14 against the requirement of 20 at this stage. There are no computer terminals available in the library.
 6. There is no flooring in all the hospital. Messing facilities are not available in all the hospital. The accommodation for teaching staff is still under construction.
 7. OPD is under construction. There is a separate Non Functional injection room for male and female, Non functional dressing room, Non functional plaster room, Non functional plaster cutting room, No E.C.G. room, central clinical laboratory (only Pathology), No audiometry room, No immunization room, No family welfare clinic, dark room refraction room, minor O.T. Flooring, plastering of walls, raising of walls on one side, Electric connection, water connection, toilet facility, and furnishing with requisite equipment needs to be done. There is no record of OPD patients in the respective OPD's.
 8. In Wards - no duty doctor room, no nursing duty room, no nursing station, no pantry, no examination / procedure room, no teaching area and no side laboratories are provided in many wards. Nil clinical demonstration areas have been provided in the wards. There is no seminar hall in the major departments. There is no record of admission /discharges in any ward. No registers are maintained in the ward with regard to patient's treatment Order.
 9. ICD X Classification of diseases is not followed for indexing.
 10. Casualty in the hospital is non-functional and no doctors and no nursing staff. Specialists are not available on call. The casualty services for Obstetrics & Gynaecology are not available. The equipment in the casualty is inadequate. There is no central oxygen/central suction facility in the casualty.
 11. The Central Laboratory has only clinical Pathology section and is not under the control of any doctors. Only routine haematology and routine biochemistry test are being carried out in the clinical pathology section in the central lab.
 12. There are only three operation theatres against the requirement of 4 which is inadequate. The Equipment in the O.T. is grossly inadequate. There is no central oxygen/N₂O/central suction facility in operation theatre.
 13. Facilities and equipment in ICUs are Inadequate. No Doctors/Nurses are posted in the ICU. There is no record of patients admitted in any ICU. All the ICU's are non functional. There is no central oxygen/central suction facility in the ICU.
 14. Facilities and equipment in labour room are inadequate. No deliveries are conducted in the Labour Room. Separate labour room for septic & eclamsia cases are not available.
 15. Only two static's units and one mobile x-Ray unit are available in the department. There is only one ultra sound machine in the department. Nil ultrasound is given to Obstetrics & Gynaecology department. Protective measures as per BARC specification are not provided.
 16. Central sterilization department is not available.
 17. Intercom facilities are not available.
 18. Central laundry is not available.
 19. Kitchen - There is no provision of special diet. Services of dietician are not available.
 20. Canteen is not available.
 21. Incinerator is not available
 22. The para medical staff is grossly inadequate and is not as per MCI norms as under:-

Laboratory Technicians	: 04
Laboratory Assistants	: 02
Laboratory Attendants	: 04

23. Nursing Staff is grossly inadequate as under :

Nursing Superintendent	:	Nil
Deputy Nursing Superintendent	:	Nil
Matron	:	Nil
Asstt. Nursing Superintendent	:	Nil

Nursing Sisters	:	28
Staff nurses	:	08

24. In Anatomy department, the capacity of two demonstration rooms is 36 which is not as per Regulations. Departmental library have only 36 books which is inadequate. There is no storage tanks and cadavers. There is no embalming room. Museum is not divided into any parts. There are no mounted and unmounted catalogues are available. No research laboratory is available.
25. Biochemistry department is under construction.
26. Offices are not available for teaching and non teaching staff and para clinical and clinical departments.
27. Other deficiencies as pointed out in the inspection report.

In view of above and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Jamuhar Distt. Rohtas, Bihar by Deo Mangla Memorial Trust, Rohtas, Bihar u/s 10(A) of the IMC Act, 1956.

58. Establishment of a new medical college at Ghaziabad, Uttar Pradesh in the name of Saraswathi Institute of Medical Sciences, Ghaziabad by Saraswathi Ammal Educational & Charitable Trust, Chennai, Tamil Nadu.

Read: The Council Inspectors report (13th & 14th May, 2008) for grant of Letter of Permission for establishment of new medical college at Ghaziabad, Uttar Pradesh in the name of Saraswathi Institute of Medical Sciences, Ghaziabad by Saraswathi Ammal Educational & Charitable Trust, Chennai, Tamil Nadu u/s 10(A) of the IMC Act, 1956 alongwith letter dated 12.05.2008 of the college authorities received through the Central Government for considering the proposal of 100 admissions instead of 150.

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 (13th & 14th May, 2008) alongwith letter dated 12.05.2008 of the college authorities received through the Central Government for considering the proposal of 100 admissions instead of 150 and decided to recommend to the Central Govt. to issue Letter of Permission for establishment of new medical college at Ghaziabad, Uttar Pradesh in the name of Saraswathi Institute of Medical Sciences, Ghaziabad by Saraswathi Ammal Educational & Charitable Trust, Chennai, Tamil Nadu with an annual intake of 100 (One Hundred) MBBS students for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

59. Increase in MBBS seats from 90 to 150 at Rajendra Institute of Medical Sciences, Ranchi.

Read: The Council Inspectors report (06th & 07th June, 2008) for grant of letter of permission for increase of MBBS seats from 90 to 150 at Rajendra Institute of Medical Sciences, Ranchi.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that at its meeting dt. 14.04.2008 while considering the inspection report, the following major deficiencies of teaching faculty and infrastructure were observed for the existing intake capacity of 90:-

“1. (a) The shortage of teaching faculty is 26.45% (i.e. 50 out of 189) as under:-

(i) Professor	2	(Physiology-1, Paediatrics-1)
(ii) Associate Prof.	23	(Anatomy-1, Biochemistry-2, FMT-1, PSM-1, Gen Med-3, TB & Chest-1, Derma-1, Gen Surgery-3, Ortho-2, Ophthal-1, Obst.&Gynae-3, Anaesthesia-1, Radio-

			diagnosis-2, Dentistry-1
(iii)Assistant Prof.	20		(Anatomy-3, Physiology-2, FMT-1, PSM-5, TB & Chest-1, Derma-2, Psychiatry-1, Ortho-1, Obst.& Gynae-1, Anaesthesia-1, Radio-diagnosis-2
(iv) Tutor	5		(Pharma-1, Microbiology-1, FMT-1, PSM-2)

(b) The shortage of Residents is 23.52% (i.e. 20 out of 85) as under :-

Sr. Resident	6	(TB & Chest-1, Psychiatry-1, Anaesthesia-1, Radio-diagnosis-3
Jr. Resident	14	(TB & Chest-3, Psychiatry-3, Ortho-6, Dentistry-2

2. There is no faculty in TB & Chest department. Thus, in effect, there is no independent functional unit in TB & Chest. There is no Psychiatry unit. Students are trained at Ranchi Institute of Psychiatry & Allied Sciences, Kanke, Ranchi.
- i. In the department of Medicine, though, the institute claims to have 6 units, but it has only 3 Professors and 1 Associate Professor. Rest of the units are headed by Assistant Professors. Thus, in effect, there are only 4 functional units.
- ii. In the Department of General Surgery - though, the institute claims to have 6 units, but it has only 2 Professors and 2 Associate Professors. Rest of the units are headed by Assistant Professors. Thus, in effect, there are only 4 functional units.
- iii. In the Department of Obst. & Gynae., though, the institute claims to have 6 units, but it has only 1 Professor and Nil Associate Professor. Rest of the units are headed by Assistant Professors. Thus, in effect, there is only 1 functional unit.
- iv. In the Department of Orthopaedics – there are two units but only 1 Professor and Nil Associate Professor. Rest of the units are headed by Assistant Professors. Thus, in effect, there is only 1 functional unit.
- v. In the Department of Paediatrics, there are two units but there is no Professor and two Associate Professors. Thus, the units are not as per Council norms.
- vi. In the Department of Dermatology - there are two units but only 2 Professors and Nil Associate Professor. Thus, the units are not as per Council norms.

3. Other deficiencies as pointed out in the inspection report. ””

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 (06th & 07th June, 2008) and noted the following:-

1. (a) The shortage of teaching faculty is 27.41% (i.e. 54 out of 197) as under:-
- | | | | |
|-------|-----------------|----|--|
| (i) | Professor | 2 | (1 Physiology, 1 Paediatrics) |
| (ii) | Associate Prof. | 19 | (2 Anatomy, 1 Physiology, 1 Biochemistry, 1 Forensic Medicine, 1 PSM, 4 Medicine, 1 Skin & V.D, 2 Surgery, 1 Ophthalmology, 2 Anasesthesiology, 2 Radio-diagnosis, 1 Dental) |
| (iii) | Assistant Prof. | 23 | (4 Anatomy, 2 Physiology, 1 Lect. (Bio), 1 Forensic Medicine, 2 Community Medicine, 1 Epid. Cum Lect., 1 RHTC, 1 UHC, 2 General Medicine, 1 TB & Chest, 2 Skin & VD, 1 Psychiatry, 3 OBG, 1 Radio-diagnosis) |
| (iv) | Tutor | 10 | (1 Anatomy, 3 Physiology, 1 Pharmacology, 1 Microbiology, 2 For. Med. 2 PSM) |

(b) The shortage of Residents is 12.5% (i.e. 14 out of 112) as under:-

(i)	Sr. Resident	08	(1 TB & Chest, 1 Skin & VD., 1 Psychiatry, 3 Anaesthesiology, 2 Radio-diagnosis)
(ii)	Jr. Resident	06	(6 Orthopaedics)

2. Auditorium is not available.
3. At R.H.T.C. Ormanjhi, electric supply is not available in the training centre and PHC. No clinical departments participate in the outreach teaching programmes. No lecturer cum medical officer having M.D.{P.S.M.} is available L.M.O. is available. No hostel / messing facilities are available.
4. At U.H.C.: Doranda - The building is very old and is in very bad shape. No lecturer cum medical officer having M.D.{P.S.M.} is posted. L.M.O. is not available. Deliveries are conducted in a room with very-2 unhygienic condition. No sterilization facilities are available.
5. OPD audiometry room is not soundproof & Air-conditioned.
6. Central Casualty Service: Only 8 beds are available in casualty area against the requirement of 20 beds.
7. Operation theatre unit: There are 16 operation theatres having total 31 tables, which is not as per norms.
8. Radiological facilities: Only two static X-ray units 1 of 700 mA and 1 of 500 mA are available, which is inadequate as per Regulations. A 500 mA X-ray static unit is attached with Image Intensifier but non functional.
9. Central sterilization department: There is no vertical autoclaves and no glove inspection machine. E.T.O. is not available.
10. Biochemistry Department: The Departmental library cum seminar room is not available
11. Pharmacology Department: There are 4 demonstration rooms with capacity of 25 - 30 seats each, which is not as per norms.
12. Pathology Department: There is only 1 demonstration room with capacity of 50 seats.
13. Books in the departmental libraries of TB & Chest-15, Skin & V.D.-60, Psychiatry-Nil & Dentistry -10 are inadequate.
14. Other deficiencies/remarks in the main report.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that the deficiency of teaching faculty is 20% and of Resident is 12.5% even for the existing intake of 90 seats as under:-

(i)	Professor	2	(Physiology -1 & Paediatrics -1)
(ii)	Associate Prof.	14	(Anatomy -1, Biochemistry -1, Forensic Medicine -1, Community Medicine -1, General Medicine -1, Ophthalmology -1, Obst. & Gynae.-3, Anaesthesia -2, Radio Diagnosis -2 & Dental -1)
(iii)	Assistant Prof.	15	(Anatomy -3, Physiology -1, Lect. Biophys.-1, Forensic Medicine -1, Community Medicine -5, TB & Chest -1, Skin & VD -1, Psychiatry -1, Radio Diagnosis -1)
(iv)	Tutor	5	(Physiology -1, Pharmacology -1, Microbiology -1 & Community Medicine -2)

(b) The shortage of Residents is 12.5% (i.e. 14 out of 112) as under:-

(i)	Sr. Resident	8	(TB & Chest -1, Skin & VD -1, Psychiatry -1, Anaesthesia -3 & Radio-diagnosis -2)
(ii)	Jr. Resident	6	(Orthopaedics -6)

In view of above and persistent and continuing deficiencies of teaching faculty and other infrastructure and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in MBBS course from 90 to 150 at Rajendra Institute of Medical Sciences, Ranchi u/s 10A of the I.M.C. Act,1956.

It was further decided that the institute be directed to remove the deficiency of teaching faculty, Residents, para-medical and nursing personnel, equipment & instrumentation and other infrastructure for existing intake within a period of 1 month and submit the compliance.

60. Increase of MBBS seats from 50 to 100 at Nalanda Medical College, Patna, Bihar.

Read: The Council Inspectors report (27th & 28th May, 2008) for grant of letter of permission for increase of MBBS seats from 50 to 100 at Nalanda Medical College, Patna, Bihar alongwith letter dated 10th June, 2008 from the Secretary (Health Department), Govt. of Bihar.

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 May, 2008) alongwith letter dated 10th June, 2008 from the Secretary (Health Department), Govt. of Bihar and noted the following:-

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

- a) Faculty: More than 27 % (i.e. 27 out of 96)
 - i) Professor : 6 (Paediatrics, Surgery, Ortho, Ophthal, OB & G & Radiodiagnosis one each)
 - ii) Assoc. Prof.: 6(Anatomy 2, Physiology, TB & CD, Anaesthesia & Dental one each)
 - iii) Asstt. Prof: 14 (Anatomy 2, PSM 5, Biophysics, Biochemistry, Microbiology, TB & CD, Radiodiagnosis, Anaesthesia & Dental one each)
 - iv) Tutor: 1 (Pharmacchemistry)
- b) Resident: More than 5 % (11 out of 74)
 - i) Sr. Resident: One (TB & CD)
 - ii) Jr. Resident: Ten (TB & CD 3 , Paediatrics 2 & Ortho 5)
- c) 23 faculty members have joined in the last one year.
- d) 10 faculty members have been transferred / left in the last one year.

2. Health Center: No mess facilities are available. No audio visual aids have been provided.
3. In Medicine, Paediatrics OPD, no class rooms are available. TB & CD OPD functions only on Wednesday & Friday and no separate space is available. DVL OPD has got 1 hall and a class room for 20 students. Psychiatry OP has got two cubicles. Surgery OPD has got 1 hall only. Dressing room and minor OT are utilized form that of casualty area. No class room is available. Ortho OP has got 2 halls no rooms for plaster and cutting but a class room for 20students is available. Ophthal OP has got 1 hall , Refraction room and a Procedure room. No class room is available. ENT OP has got 2 halls, procedure room and a class room for 20 students. Dental OP has got 1 chair and no Laboratory is provided.
4. In Wards : Pantry and examination / procedure room are not provided.
5. Space is inadequate for all teaching activities in all the departments and also for central facilities.
6. There is no functional unit in TB & Chest as no staff member is available. Paediatric, Orthopaedic & Obst & Gynae. departments are not having any Professor. Distribution of clinical units in different specialties is not as per council recommendations. Hence, composition of clinical units is not as per Council requirement.
7. Operation Theatre: Operation Theatre complex is under renovation and make shift arrangements has been made temporarily. There are 6 major and 3 minor operation theatres having a total of 13 tables which is not as per Council norms. TV with camera attachment is not available. Resuscitation and monitoring equipment is shared by the different O.T.s. The main OT complex is under renovation, hence make shift arrangement has been made.

8. Mechanized laundry is not available.
9. Canteen is not available
10. Incinerator is not available.
11. Radiological facilities: Number of static units are not available. No colour Doppler is available. Ultrasound is not available in Obst. & Gynaecology department.
12. Auditorium is not available. One of the examination halls is under renovation.
13. There is no statistical unit available in the college.
14. Facilities for experimental work are not available. All facilities for carrying out minor surgical procedures are not available.
15. Sports & recreation facilities: Facilities are not available for indoor games. Gymnasium facilities are also not available.
16. In Anatomy & Physiology departments, research laboratory is not available.
17. In Biochemistry department, research lab. seminar room and library are all located in one place. There is no demonstration room available.
18. There is no facility for doing FNAC in the hospital. There is no research lab. in the pathology department. Catalogues are not available in the department. Blood Bank is under Microbiology department.
19. In Microbiology department, student lab. and research lab. are not available. Service lab. is 3 kms. away from the college. Museum is too small and does not have adequate specimens.
20. RHTC does not have hostel accommodation for interns. No lecturer cum medical officer having MD (PSM) is posted. Audio-visual aids are not available.
21. In Obst. & Gynae. department, separate labour room is not available. Ultra sound is not available in the department.
22. Other deficiencies/remarks pointed out in the main report.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that the deficiency of teaching faculty is 26.4% and of Resident is 14.8% even for the existing intake of 50 seats as under:-

(a) The shortage of teaching faculty is 26.4% (i.e. 23 out of 87) as under:-

(i)	Professor	6	(Paediatrics -1, General Surgery -1, Orthopaedics -1, Ophthalmology -1, Obst & Gynae.-1 & Radio Diagnosis -1)
(ii)	Associate Prof.	4	Anatomy -1, TB & Chest -1, Anaesthesia -1 & Dental -1)
(iii)	Assistant Prof.	13	(Anatomy -1, Biochemistry -1, Microbiology -1, Community Medicine -5, TB & Chest -1, Radio Diagnosis -1, Anaesthesia -1, Dental -1, Pharma. Chemist -1)

(b) The shortage of Residents is 14.8% (i.e. 11 out of 74) as under:-

(i)	Sr. Resident	1	(TB & Chest -1)
(ii)	Jr. Resident	10	(TB & Chest -3, Paediatrics -2 & Orthopaedics -5)

In view of the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in MBBS course from 50 to 100 at Nalanda Medical College, Patna, Bihar u/s 10A of the I.M.C. Act, 1956.

It was further decided that the institute be directed to remove the deficiency of teaching faculty, Residents, para-medical and nursing personnel, equipment & instrumentation and other infrastructure for existing intake within a period of 1 month and submit the compliance.

61. **Case No.3944/2007 in the matter of Md. Shah Afzal – Vs. - Medical Council of India & Anr. in the Court of Chief Commissioner for Persons with Disabilities, New Delhi.**

Read: The matter with regard to Case No.3944/2007 in the matter of Md. Shah Afzal – Vs. - Medical Council of India & Anr. in the Court of Chief Commissioner for Persons with Disabilities, New Delhi alongwith legal opinion of the Council Advocate.

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

“The present case file has been referred to me by the legal section after receiving the decision of the Executive Committee of the Council dated 12.5.2008; whereby it has been decided by the committee after perusing the order dated 8.9.2007 passed by Chief Commissioner for Persons with Disabilities, New Delhi in the aforesaid case.

After perusing the case file as well as the order dated 8.9.2007, it has been observed by me that Ld. Court has passed the following directions mentioned as under:-

“to extend relaxations in marks etc. at par with SCs and STs, to all persons with irrespective of their vertical categories in the Delhi PMT and other such examination (if admission is still in progress) from the current academic year. Necessary directions, if needed, be issued immediately by respondent No.1, so that the cases to candidate with disabilities in Delhi PMT exam could be re-examined prior to last counseling i.e. 27.9.2007.

Respondent No.2 to also ensure that all Government and Government aided institutions running medical courses are directed to extend relaxations in marks etc. at par with SCs and STs to all persons with disabilities irrespective of their vertical categories for all academic courses and also direct to and accept medical certificate issued by Medical Board notified by State/Central Government, if produced for availing concessions by the persons with disabilities.”

It is pertinent to mention here that the Ministry of Health, Govt. of India vide its letter dated 12.05.2004 informed all the States and Union Territories bringing to their notice the guidelines of the MCI dated 14.7.2003 having the above mentioned stipulations of considering candidates for the 3% quota having regard to disability of lower limbs between 50% to 70% and that other conditions for admission to medical courses would be as per MCI norms. The said letter dated 12.5.04 the Central Govt. has inter-alia directed various authorities to ensure that the admission of physically handicapped candidates would be as per MC norms as had been provided for the communication dated 14.7.2003 of the MCI.

In the meanwhile the MCI preferred an SLP(C) No.7952-53 of 2005 and MIC V/s D.S. Rashmi Ranjan & Ors. challenging the judgment dated 2.2.2005 passed by the Ld. Division Bench of the Orissa High Court in W.P. No.7877 and 7878 of 2004 whereby the Ld. Division Bench has been pleased to hold that “in view of the definition of a person with disability’ under section 2(t) of the Persons with Disabilities (Equal Opportunities, Protection of Right) and full participation Act, 1995 (hereinafter referred to as the Disability Act read with section 39 of the said Act) all persons with 40% and above disability till the limit of 70% would be eligible for admission to medicine courses.

The Hon’ble Supreme Court in the aforesaid matter has already granted stay to the operation of order dated 2.2.2005 passed by Ld. Division Bench of Orissa High Court. It has been also informed to me that in the meantime the MCI received a letter from Govt. of India dated 21.9.2004 forwarding with a letter dated 2.9.2004 of the Chief Commissioner of Disabilities under the 1995 Act for consideration of stipulating 40% as the degree of disability for admission in the Medical Courses. The said communication dated 2.9.2004 of Chief Commissioner of Disabilities was placed before the Executive Committee of the Council in its meeting held on 30.12.2004. The council also placed the said communication dated 2.9.2004 before the Hon’ble Supreme Court in the aforesaid matter and certain observations was made by the Hon’ble Supreme Court vide its order dated 24.8.2006 which was placed before the Executive Committee of the Council in its

meeting held on 7.9.2004 where the members of the Adhoc Committee appointed by the Hon'ble Supreme Court were also present. Upon deliberations, it was decided by the Executive Committee that the present prescription of disability between 50% to 70% locomotory disability by lower limbs for receiving the benefits of admission in the medical courses should continue, subject to medication that in that event when there are not sufficient number of candidate having locomotory disability of the lower limbs of 50% to 70%, the unfilled seats should be filled up by the candidates having locomotory disability of the lower limbs to the extent of 40% to 50% before they are converted into the open category seats. The said decision of the Executive Committee was circulated by the members of the GB and the decision of the GB of the Council was communicated by the MCI vide its letter dated 18.1.2007 to the Ministry of Health, Govt. of India and also informed to the Hon'ble Supreme Court vide additional affidavit dated 10.1.2008 in the above mentioned case and the decision of the Hon'ble Supreme Court is still awaited.

Besides this, it has also been informed to me by the legal section that the similar issue pertaining to minimum qualifying marks to physically handicapped persons at par with qualifying marks for SC, ST and OBC classes were decided by the Hon'ble High Court of Punjab and Haryana vide its decision dated 28.4.2006 Mohit Sharma V/s State of Punjab & Ors. was pleased to dismiss a writ petition wherein the case of petitioner was that the minimum percentage of marks for the reserved categories was 40% to qualify in the medical entrance test and therefore in respect of physically handicapped category also the percentage applicable to qualify the medical entrance test should be 40%.

In another case the Hon'ble High Court of Kerala at Ernakulam in the case titled Sakeena Vs MCI & Anr. Vide its judgment dated 26.7.2007 and it was held by the court as under:-

“The petitioner challenges the cut of marks of 50 percent to the secured by the physically handicapped candidates in the entrance examination for becoming eligible for admission to medical degree courses in Kerala. This court has repeatedly held that in order to ensure that only competent persons came out of the medical colleges with a degree to treat the public, it is necessary to lay down very strict eligibility criteria for admission to medical colleges. The prescription of 50 percent mark for physically handicapped persons in the entrance examination cannot, by any stretch of imagination, be held to be arbitrary. Therefore, I do not find any merit in the writ petition and accordingly the same is dismissed.”

In the present case the candidate Mohd. Afzal has also filed a writ petition bearing W.P.(C) No.1352/08 before the Hon'ble Delhi High Court seeking directions for compliance of the order dated 8.9.2007 passed by the Hon'ble Court of Chief Commissioner for Person with Disability is still pending and the MCI has already filed a detail reply affidavit in the present case and the Hon'ble High Court has granted four week time to the petitioner to file the rejoinder and the matter is now listed on 14.8.2008 for further proceedings.

In view of the above mentioned facts and settled position of law and during the pendency of the writ petition filed by the candidate before the Hon'ble High Court and SLP (C) No.7952-53 of 2005, titled as MCI V/s D.S. Rashmi Ranjan & Ors., before the Hon'ble Supreme Court on similar issues, the Council is accordingly advise not to take any decision in the case of Mohd. Shah Afzal as directed by the Chief Commissioner, for the Persons with Disabilities, New Delhi till the disposal of above mentioned cases”.

62. Increase in MBBS seats from 59 to 100 at Institute of Medical Sciences, BHU, Varanasi, U.P.

Read: The Council Inspectors report (30th and 31st May, 2008) for grant of letter of permission for increase of MBBS seats from 59 to 100 at Institute of Medical Sciences, BHU, Varanasi, U.P.

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 (30th and 31st May, 2008) and noted the following:-

1.(a) The shortage of teaching faculty is 20.68% (30 out of 145) as under:-

- i) Professor nil
- ii) Associate Professor 5 (Physio-2,Bio-Chem-1,Pharmac-1, ENT-1,)
- iii) Assistant Professor 4 (Commu.Med-2,Epi-1,Med- 3
Surgery-2,OBG-2,ANMO-1,
MWO-1, Radio-Dig-2)
- iv) Tutor 11 (Anatomy-4,Physiology-1,Pathology-1)
Anaesthesia-4,Radio-Dig-1)

(b) The shortage of Residents is 27.94 % (19 out of 68) as under :-

- i) Sr. Resident 14 (Med-3,Ped-1,TB-1,Derma-1,Surg-2,
Ortho-2,ENT-1,Oph-1,OBG-2)
- ii) Jr. Resident 05 (TB-3, Derma-1, Oph-1,)

2. Teaching beds are inadequate in the department of Medicine as 96 beds are available against 101 required at this stage as under:-

Speciality	Required Beds/Units	Present Beds/Units	Deficiency (if any)
General Medicine	101/3	96/3	05

- 3. Medical Record department is not computerized at all. There is no MRO. NO OPD record/ Statistics is available in MR Room. No Classification of diseases is followed for indexing regularly. Follow up service is not available. Records for in-patients are kept manually.
- 4. In Anatomy department, there are no cooling cabinet, no embalming room, no student lockers are provided. There is no research laboratory. The capacity of 2 demonstration room is 40 against the requirement of 60 as per Regulations.
- 5. In Physiology department, there are no separate amphibian and mammalian labs. The capacity of 2 demonstration rooms is 40 against the requirement of 60 as per Regulations.
- 6. In Biochemistry, gas cylinders are kept inside the laboratory which is not as per norms.
- 7. There is only one laboratory & one demonstration room between Pathology & Microbiology departments which is shared by both the departments.
- 8. There is no separate laboratory or demonstration room in Microbiology department. There is no gas supply in the laboratory.
- 9. There are no inpatient facilities at RHTC, Chiraigaon.
- 10. Other deficiencies as pointed out in the inspection report.

In view of the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon’ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in MBBS course from 59 to 100 at Institute of Medical Sciences, BHU, Varanasi, U.P. u/s 10A of the I.M.C. Act,1956.

63. Change of affiliation of the University in respect of Rural Medical College, Loni and inclusion of medical qualification in the first schedule of the IMC Act, 1956.

Read: The letter dated 18.02.2008 received from the Central Govt. along with letter dated 08.02.2008 of the Principal, Rural Medical College, Loni matter with regard to change of affiliation of the University in respect of Rural Medical College, Loni and inclusion of medical qualification in the first schedule 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 Central Govt. letter dated 18.02.2008 alongwith letter dated 08.02.2008 received from the Principal, Rural Medical College, Loni with regard to change of affiliation of the University in respect of Rural Medical College, Loni and inclusion of medical qualification in the first schedule of the IMC Act, 1956 and observed that the Executive Committee at its meeting held in June, 1988 had decided as under:-

"No inspection is required where there is change of name and change of affiliation of the University or the college whose medical qualifications are already recognized and included in the 1st Schedule to the I.M.C. Act, 1956 unless the Executive Committee decides otherwise."

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that the first batch of MBBS students under the aegis of Pravara Institute of Medical Sciences, Loni (Deemed University) was admitted in the year 2004-05. Under these circumstances, the first batch appearing for the final examination would be during the year 2008-09.

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 that the Institute be advised to approach to the Council at the relevant point of time when the first batch is appearing in the final examination, as indicated above for further necessary action.

64. Inclusion of the name of KLE University (Deemed University) for the award of MBBS and various postgraduate qualifications in respect of students being trained at J.L.N. Medical College, Belgaum in the first schedule of the IMC Act, 1956.

Read: The letter dated 27.02.2008 received from the Registrar, KLE University with regard to Inclusion of the name of KLE University (Deemed University) for the award of MBBS and various postgraduate qualifications in respect of students being trained at J.L.N. Medical College, Belgaum in the first schedule 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 letter dated 27.02.2008 received from the Registrar, KLE University for inclusion of the name of KLE University (Deemed University) for the award of MBBS and various postgraduate qualifications in respect of students being trained at J.L.N. Medical College, Belgaum in the first schedule of the IMC Act, 1956 and observed that the Executive Committee at its meeting held in June, 1988 had decided as under:-

"No inspection is required where there is change of name and change of affiliation of the University or the college whose medical qualifications are already recognized and included in the 1st Schedule to the I.M.C. Act, 1956 unless the Executive Committee decides otherwise."

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that KLE University is admitting the students for Undergraduate, Postgraduate Degree and Postgraduate Diploma courses from the academic year 2006-07 onwards. Under these circumstances, the first batch appearing for the final examination would be during the year 2010-11, 2009-10 and 2008-09 respectively for Undergraduate, Postgraduate Degree and Postgraduate Diploma courses.

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 that the Institute be advised to approach to the Council at the relevant point of time when the first batch is appearing in the final examination as indicated above for further necessary action.

65. Complaint against Dr. S.M. Tuli, (VIMHANS), New Delhi as alleged by Mr. Dalip Jaswani – reconsideration regarding (F.No. 292/2007).

Read: The matter with regard to Complaint against Dr. S.M. Tuli, (VIMHANS), New Delhi as alleged by Mr. Dalip Jaswani – reconsideration regarding (F.No. 292/2007 alongwith the recommendation of the Ethics Committee.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council approved the following recommendations of the Ethics Committee:-

“The Ethics Committee considered the complaint against Dr. S.M. Tuli (VIMHANS), New Delhi as alleged by Mr. Dalip Jaswani and decided to request Mr. Dalip Jaswani to provide the registration particulars of Dr. S.M. Tuli.

The Ethics Committee further decided to write to the Director, VIMHANS, New Delhi with the request to provide the registration particulars of Dr. S.M. Tuli as well as para-wise comments regarding the complaint lodged by Mr. Dalip Jaswani.

The Ethics Committee also decided to write to Dr. S.M. Tuli on the address as provided by the complainant with the request to give his para-wise comments on the complaint lodged by Mr. Jaswani as well as to provide this Council his registration particulars and details of the case sheet and relevant documents in this particular case”.

The above decision was communicated to the Director, Vidya Sagar Institute of Mental Health and Neurology, Dr. S.M. Tuli as well as Mr. Dilip Jaswani (complainant) vide Council's letter dated 5-9-2006.

In response to above, Mr. Dilip Jaswani had sent a letter dated 12-9-2006.

Another letter dated 11-9-2006 was received from Dr. R.P. Arora, Chief Administrator, VIMHANS alongwith para-wise comments. On perusal of the letter it is noted that Dr. Surender Mohan Tuli is the registered with Punjab Medical Council bearing Regn. No. EP-4298 dated 13.12.1955.

The above matter was considered by the Ethics Committee at its meeting held on 13th October, 2006 and the Committee decided as under:-

“The Ethics Committee considered the matter with regard to complaint against Dr. S.M. Tuli (VIMHANS), New Delhi as alleged by Mr. Dalip Jaswani and noted that as Dr. S.M. Tuli is registered with the Punjab Medical Council bearing No. EP-4298, the Ethics Committee decided to refer this matter to Punjab Medical Council for taking necessary action at their end within six months of receipt of this communication under intimation to this Council. A copy of the same may be marked to the complainant. This may be recorded in the referral register”.

As per above decision, the Registrar, Punjab Medical Council had requested to investigate and take necessary action under intimation to this Council as well as to the complainant within a period of six month vide Council's letter dated 03.11.2006 with a copy to complainant. The reply remained awaited from the Punjab Medical Council.

It may further be stated that the Council received a letter dated 09.07.2007 from Mr. Dilip Jaswani in which it is stated as under:-

“Your kind attention is invited to the above letter on the subject. Sir, it is now more than six months have passed, and I have not received any reply for action taken against the Dr. S.M. Tuli based on my complaint supported with documents.

Hon. Sir, in order to give natural justice in the interest of common public I once again with my folded hands request your good self to kindly intervene in the matter by expediting the action required to be taken against my complaint, based on the reply received from the Punjab Medical Council.

It is presumed that by now the Punjab Medical Council must have furnished the details of their action taken against Dr. S.M. Tuli to your good self.

I shall appreciate if the developments in this case are informed to me at your earliest. In case you require any clarification or documents from my end, the same will soon be furnished”.

The matter was considered by the Ethics Committee at its meeting held on 10th & 11th September, 2007 and the decision was as under :-

“The Ethics Committee considered the matter with regard to complaint against Dr. S.M.Tuli (VIMHANS), New Delhi as alleged by Mr. Dalip Jaswani and examined all the documents pertaining to this case and have decided to (i) Call the complainant in its next meeting at 11.30 a.m. & (ii) ask Dr. S.M. Tuli (VIMHANS) to be present before the Ethics Committee at 12.00 noon. in its next meeting alongwith all the concerned documents pertaining to this case. (iii) A letter may be sent to the Registrar, Punjab Medical Council to inform the Medical Council of India regarding the present status of the case and submit all the documents that they might have been in their possession.”

As per above decision, Mr Dalip Jaswani had requested to appear before the Ethics Committee on 6th December 2007 at 11.30 a.m. vide Council's letter dated 26/11/2007.

Dr. S.M. Tuli had also requested to appear before the Ethics Committee on 6th December 2007 at 12.00 Noon vide Council's letter dated 26/11/2007

Further, the Registrar Punjab Medical Council had also requested to provide the present status of the case and to submit all the documents that they are having in their possession, vide Council's letter dated 26/11/2007.

The matter was considered by the Ethics Committee at its meeting held on 6th & 7th December, 2007 and the decision was as under:-

“The Ethics Committee call Mr. Dalip Jaswani, the complainant to appear before the Ethics Committee meeting on 06.12.2007 and Sh. Dalip Jaswani has appeared. Sh. Dalip Jaswani has also submitted the detailed appeal u/s 8.8 of the Indian Medical Council (Professional Conduct Etiquette and Ethics) Regulations, 2002 against the order of Delhi Medical Council dt. 28.09.2007. the Ethics Committee decided to record Sh. Dalip Jaswani's oral submission which is as under:-

Statement of Sh. Dalip Jaswani

I Dalip Jaswani S/o. Sh. P.K. Jaswani R/o M-58/Lajpat Nagar, New Delhi -2.

As we have contacted Dr. S.M. Tulli, VIMHANS, New Delhi for the treatment of my brother and he suggested us for immediate operation. We submitted our consent for the same and the operation was made on 12.09.2005 and they have discharged my brother on 16.09.2005. After the operation my brother experience a tremendous pain and the same is reported to Dr. S.M. Tulli from time to time. Meanwhile we would like to inform that the biopsy section was taken on 12.09.2005 at the time of operation and its report prepared on 16.09.2005 by VIMHANS Hospital, New Delhi and the same information given to patient on 27.12.2005 with the Malignancy. The patient was taken to AIIMS, New Delhi with very bad condition or on advance stage of cancer. We understand that Dr. S.M. Tulli deliberately not informed the patient about the cancer, reason known to him. We suspect that after the operation Dr. Tulli realizes that Tumor was Malignant in nature and should not be operated upon, therefore, he hides this information of Biopsy report and wait for the death of patient. I, therefore, request you to kindly consider few more pages which are enclose herewith for your kind consideration and hope for the justice from your end.

*Thanking you.
(Sh. Dalip Jaswani)
06.12.2007*

It was observed that the report of the Biopsy taken at the time of Surgery was received on 16.09.2005 and the patient was discharged also on the same day i.e. 16.09.2005 with an advice to attend after 3 weeks from the date of operation and the patient reported on 27.09.2005 for removal of stitches. The patient was on the non-specific treatment. It is only on 27.12.2005 when the opinion of the Oncologist was sought thereby leaving a gap of more than 3 months after biopsy report.

The Ethics Committee noted that Dr. S.M. Tulli was asked to appear before the Ethics Committee on 6.12.07 but he did fail to do so. The Committee decided to give him one more last and final chance to appear before the Ethics Committee in its next meeting."

As per above decision, Dr. S.M.Tuli has been requested to appear before the Ethics Committee on 22nd January 2008 at 12.00 Noon vide Council's letter dated 31.12.2007.

The matter was considered by the Ethics Committee at its meeting held on 21st & 22nd January, 2008 and the decision was as under :-

"The Ethics Committee discussed all the aspects pertaining to the case of Dr. S.M. Tuli of VIMHANS Hospital, New Delhi and noted that Dr. S.M. Tuli was called and he has appeared and submitted his statement, which is as follows:-

Statement of Dr. S.M. Tulli

"I Dr. S.M. Tulli have passed my MBBS in 1955 from Medical College, Amritsar and I have done MS (Surgery) in 1958 from the same college. I did my Phd. (Orthopaedic Surgery) in 1966. My date of birth is 27.12.1932 and my registration no. is 14182 of Delhi Medical Council. Regarding this case I would like to record my statement which is as under:-

I had treated the patient Mr. Mahesh Jaswani, 43 years Male, in September, 2005. He came to me with a disease in the Spine with diabetes. The MRI suggested the possibility of Tuberculosis infection. There was clear history of treatment of his wife in our hospital for tuberculosis and cold abscesses. To reconfirm the diagnose of the disease in the Spine a Biopsy was done for final histological diagnosis. The material was sent as an outsourcing to Noida Medical Centre. The patient attended the hospital about two weeks after the operation for removal of stitches. However, the Biopsy report was not brought by the patient or his family. I had to be out of station for few weeks, it was in December that the biopsy report was shown to my younger associate by the attendants of the patient. Unfortunately the diagnosis was malignant hystiocytoma. It is unfortunate that the disagnose turned out to be a very malignant cancerous disease. The prognosis of survival in such patients is very poor. I would reiterate that no professional negligence was involved in this case."

*Sd/-
(Dr. S.M. Tulli)
22.01.2008*

The Ethics Committee has taken into consideration the statement of the complainant as such statement of Mr. Dalip Jaswani and various other facts of the case and also after examining all the documents, the Ethics Committee notice that:

1. *The Biopsy report of the patient was sent by the hospital for histopathology examinations on 12.09.2005 and the report of the said examination was received by the hospital on 16.09.2005 and the patient was also discharged on the same date i.e. 16.09.2005.*
2. *The operating surgeon Dr. S.M. Tuli failed to inform the patient on the date of discharge on 16.09.2005 about the biopsy report which was highly malignant.*
3. *Again on 27.09.2005 when the patient came for removal of stitches and the biopsy report was already available with the hospital on 16.09.2005 the treating surgeon Dr. S.M. Tuli failed to inform the patient about the serious diagnose of Malignancy and failed to advice him for the treatment.*
4. *Three long months elapsed before the doctors of VIMHANS Hospital informed the patient regarding diagnose of the disease and the case was referred to Oncologist on 27.12.2005.*
5. *The Ethics Committee notice that there is fault on the part of treating doctor by not showing the report to the patient party.*

Considering all the above five points, the Ethics Committee is of the unanimous opinion that there is negligent on the part of Dr. S.M. Tuli in treating this patient depriving for the chance for further treatment.

The Ethics Committee, therefore, decides to recommend for removal the name of Dr. S.M. Tuli from the Indian Medical Register for the period of three months.

The Ethics Committee further notice that there is failure on the part of VIMHANS Hospital, New Delhi also because they have failed to inform the patient about the biopsy report which has arrived at the hospital in time.

The Ethics Committee has further noted the observations raised by the Delhi Medical Council on the elapses of the hospital in this regard and has therefore, decided to issue a strong censure to the concerned authorities of VIMHANS Hospital, New Delhi for this failure. This censure may also be communicated to the registering authority i.e. Directorate of Health Services, Govt. of NCT, New Delhi and also to the Secretary (Health) besides the hospital.”

The matter was considered by the Executive Committee at its meeting held on 08/03/2008 and the decision was as under:-

“The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the matter with regard to complaint against Dr. S.M. Tuli, (VIMHANS), New Delhi as alleged by Mr. Dalip Jaswani alongwith the recommendation of Ethics Committee and decided to refer the matter back to the Ethics Committee for reconsideration.”

The matter was considered by the Ethics Committee at its meeting held on 21.05.2008 and the decision was as under:-

“The Ethics Committee considered the complaint against Dr. S.M. Tuli, (VIMHANS), New Delhi as alleged by Mr. Dalip Jaswani and noted that the Committee had completed its investigation of complaint against Dr. S.M. Tuli, (VIMHANS), New Delhi as alleged by Mr. Dalip Jaswani and had sent its recommendations to the Executive Committee. The recommendations of the Ethics Committee was considered by the Executive Committee at its meeting held on 08.03.2008 wherein the Executive Committee has decided to refer back this case to the Ethics Committee for re-consideration.

The Ethics Committee once again examined all the documents pertaining to this case thoroughly and decided to reiterate its previous decision that there is negligence on the part of Dr. S.M. Tuli in treating the patient for the reasons already stated.

However, the Ethics Committee after thorough discussion has decided that the recommendation for removal of name of Dr. S.M. Tuli from Indian Medical Register for a period of three months be changed.

The Ethics Committee after review unanimously decided that the name of Dr. S.M. Tuli may be removed from the Indian Medical Register for a period of four weeks instead of three months.”

66. Complaint against Dr. Nervikkar of Paari Nursing Home, Coimbatore and Royal Diagnostic Lab as alleged by Mrs. Vasanthakumari.

Read: The matter with regard to Complaint against Dr. Nervikkar of Paari Nursing Home, Coimbatore and Royal Diagnostic Lab as alleged by Mrs. Vasanthakumari alongwith the recommendation of the Ethics Committee.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council approved the following recommendations of the Ethics Committee:-

“The Ethics Committee considered the matter with regard to complaint against Dr. Nervikkar of Paari Nursing Home, Coimbatore and Royal Diagnostic Lab as alleged by Mrs. Vasanthakumari and noted that on the perusal of the IMR data, there is no entry in the name of Dr. Nervikkar has been found. The Ethics Committee decided to write the complainant to provide the address, Telephone Nos. and details of registration

particulars and other records of Dr. Nervikkar at the earliest without this information no action can be taken.

Further, the Ethics Committee decided to write the Medical Superintendent, Paari Nursing Home, Coimbatore to provide the address, Telephone Nos. and details of registration particulars and other records of Dr. Nervikkar within 15 days from receipt of this communication."

As per above decision Mrs.Vasanthakumari was requested to provide the address, telephone nos. and details of registration particulars and other records of Dr.Nervikkar vide Council letter dated 24.7.2007.

In response to above, Mrs. Vasanthakumari has sent a letter dated 2.8.2007.

The Medical Supdt., Paari Nursing Home, Coimbatore was also requested to provide address, telephone nos. & registration particulars and other records of Dr.Nervikkar within 15 days of receipt of this communication vide Council letter dated 24.7.2007.

In response of above, Dr. K.Vijayaraghvan, Paari Nursing Home, Coimbatore vide his letter 09.08.2007 has stated as under:-

"Dr. Nervikkar M.D.R.D., was a visiting consultant in Radiology in our Nursing Home. He was originally employed at K.G.Hospital, Coimbatore (Phone 042222121)

He has left K.G. Hospital six months back and has settled Abroad. I could not get his residential address and Telephone numbers.

I have herewith enclosed a copy of the Ultra Sonogram of abdomen done by him."

The matter was considered by the Ethics Committee at its meeting held on 10th & 11th August, 2007 and the decision was as under:-

"The Ethics Committee considered the matter with regard to complaint against Dr. Nervikkar of Paari Nursing Home, Coimbatore and Royal Diagnostic Lab as alleged by Mrs. Vasanthakumari and the Ethics Committee observed that Medical Superintendent, Paari Nursing Home, Coimbatore was asked to provide address, telephone nos. & registration particulars and other records of Dr. Nervikkar within 15 days of receipt of this communication. The reply is still awaited. In the meantime, a letter has been received from Mrs. Vasanthakumari dated 02.08.2007 where she has stated that Dr. Nervikkar has got nothing to do with my grievance, instead the issued in pivoted on Dr. Vijayaragavan and his wife Smt. Santha who are managing the whole administration of the hospital and also handled the case.

The Ethics Committee therefore decided to write Dr. K. Vijayaraghavan, Medical Superintendent, who is managing the Paari Nursing Home, Coimbatore and also incharge of the case to provide details of their registration particulars alongwith parawise comments to the complaint, letter of complaint may be sent to them. They may be requested to send all the particulars within 15 days of receipt of this letter. Further, the Ethics Committee decided to request the District Magistrate of Coimbatore to use his good office in sending the information sought by the Medical Council of India from Dr. K. Vijayaraghavan, Medical Superintendent, Paari Nursing Home, Coimbatore. The matter may be listed for second next meeting."

As per above decision, the Medical Superintendent & Incharge, Paari Nursing Home, Coimbatore was requested to provide the details of registration particulars of Dr. Nervikkar alongwith para-wiase comments within 15 days of receipt of this letter vide Council's letter dated 27.10.2007 with the copy to the District Magistrate, Coimbatore.

In response to above, Dr. K. Vijayaraghavan, Paari Nursing Home, Coimbatore has sent two letters dated 11.12.2007 and another without date, which was received in the Council on 04/12/2007

No particulars of registration of the said doctor has been provided. No information was received from District Magistrate.

The matter was considered by the Ethics Committee at its meeting held on 21st May, 2008 and the decision was as under:-

The Ethics Committee considered the complaint against Dr. Nervikkar of Paari Nursing Home, Coimbatore and Royal Diagnostic Lab as alleged by Mrs. Vasanthakumari and went through all the available records of this case. The points of allegations and the reply of the surgeon Dr. K. Vijayaraghvan of Paari Nursing Home were noted. After perusal of all these documents it appears that the operative procedure followed are according to the statute operative procedure and explanation that at the time of laprotomy the left ovary and the appendix were not found to be diseased and hence not removed are acceptable.

The patient has developed problems after nine months of this operation and was further operated at Kongunadu Hospital where left ovary and intestinal appendix were removed. The only point in this case is that the laboratory report of histopathological examination of the ovary after the first operation states that the specimens sent is that of left ovary while during the operation the right ovary was removed. The operating surgeons namely Dr. K. Rajendran (MD, DGO), Dr. K. Vijayaraghvan and Dr. N. Shantha do not clarify this fact at that time and even now. This is a very important point that should have been clear so as to leave no doubt in anybody's mind. In this case the surgeons Dr. K. Rajendran, Dr. K. Vijayaraghvan and Dr. N. Shantha can be called careless and they can be held responsible for such act even if the laboratory specimens was sent by subordinates.

Keeping all these points in view, the Ethics Committee decided to issue a warning to Dr. K. Rajendran, Dr. K. Vijayaraghvan and Dr. N. Shantha to be very careful in future and to maintain high professional status as well as compassionate communications with the patient and attendants."

67. Establishment of New Medical College at Panikhaiti by Down Town Charity Trust.

Read: The Compliance Verification Inspection report (30th May, 2008 & 10.06.2008) alongwith Council Inspectors report (29th and 30th April, 2008) for grant of Letter of Permission for establishment of new medical college at Panikhaiti by Down Town Charity Trust u/s 10(A) of the IMC Act, 1956 and letter dated 11.6.2008 received from the Principal of the Institute.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the Compliance Verification Inspection report (30th May, 2008 & 10.06.2008) alongwith Council Inspectors report (29th and 30th April, 2008) and letter dated 11.6.2008 received from the Principal of the Institute and noted the following:-

1.(a) The shortage of teaching faculty is 87 % (48 out of 55) as under:

- i) Professor: 5 (1 Anatomy, 1 Physiology, 1 Biochemistry, 1 Gen. Medicine, 1 Gen. Surgery)
- ii) Assoc. Prof: 13 (2 Anatomy, 2 Physiology, 1 Biochemistry, 1 Pharmacology, 1 Pathology, 1 Microbiology, 1 C.M., 1 Paediatrics, 1 Orthopaedics, 1 O.G., 1 Radio Diagnosis)
- iii) Asstt. Prof.: 16 (3 Anatomy, 2 Physiology, 1 Lect.(Bio), 1 Biochemistry, 1 Pathology, 1 F.M., 1 Gen. Medicine, 1 Gen. surgery, 1 E.N.T., 1 O.G., 1 Anaesthesia, 1 Radiodiagnosis, 1 Dentistry)
- iv) Tutor: 14 (4 Anatomy, 4 Physiology, 1 Biochemistry, 1 Pharmacology, 1 Pathology, 1 Microbiology, 1 F.M., 1 C.M.,)

(b) The shortage of Residents is 74 % (31 out of 42) as under:

- i) Sr. Resident: 12 (2 Gen. Medicine, 1 Paediatrics, 3 Gen. Surgery, 1 E.N.T., 2 O.G., 2 Anaesthesia, 1 Radiodiagnosis)
- ii) Jr. Resident: 19 (7 Gen. Medicine, 2 Paediatrics, 7 Gen. Surgery, 2 Orthopaedics, 1 Ophthalmology)

2. (a) Clinical Material is grossly inadequate as under:

	Day of Inspection
O.P.D. attendance	19 (Upto 12 noon)
Casualty attendance	1
No. of admissions/discharge	Nil / nil
Bed occupancy%	8.33
Operative work	
Number of major surgical operations	1
Number of minor surgical operations	Nil
Number of normal deliveries	Nil
Number of caesarian Sections	Nil
<u>Radiological Investigations</u>	
X-ray	2
Ultrasonography	nil
Special Investigations	nil
<u>Laboratory Investigations</u>	
Biochemistry	Nil
Microbiology	Nil
Serology	Nil
Parasitology	Nil
Haematology	Nil
Histopathology	Nil
Cytopathology	Nil
Others	-

Note: Both the male wards of Medicine, three male Surgical wards, Paediatric ward, Orthopaedic ward, Ophthalmology ward and E.N.T. ward were found to be closed.

- (b) Detailed Distribution of Patients is as under:-

Department	Occupancy
Medicine	14 Male + 3 Female
Surgery	0 Male + 7 Female
O.G.	1
Paediatrics	Nil
E.N.T.	Nil
Ophthalmology	Nil
Orthopaedics	Nil

Note: There were total 25 patients out of 300 – i.e. bed occupancy 8.33 %.

3. Other deficiencies pointed out in the inspection report.

In view of above and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Panikhaiti by Down Town Charity Trust u/s 10(A) of the IMC Act, 1956.

68. Approval of GSL Medical College & Hospital, Rajahmundry for the award of MBBS degree granted by Dr. NTR University of Health Sciences, Vijayawada.

Read: The Council Inspectors report (25th & 26th April, 2008 & 21.5.2008) for approval of the college for the award of MBBS degree granted by Dr. NTR University of Health Sciences, Vijayawada alongwith letter dated 21.5.2008 received from the Principal of the Instt.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council while considering the inspection report of the institute at its meeting held on 12.5.2008 had decided as under:-

“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 (25th & 26th April, 2008) and decided to recommend to the Central Govt. to renew the permission for admission of 6th batch of 150 MBBS students at GSL Medical College & Hospital, Rajahmundry for the academic session 2008-09.”

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council further decided to recommend that GSL Medical College & Hospital, Rajahmundry be approved for the award of MBBS degree granted by N.T.R. University of Health Sciences, Vijayawada with an annual intake of 150 (One Hundred Fifty) students per year.”

Thereafter, the complaints were received in the Council Office wherein it was decided to verify the teaching faculty, the communication to the Central Govt. was withheld and another inspection to verify teaching faculty and clinical material available at the institute by way of inspection which was conducted by the Council Inspectors on 21.5.2008.

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 (25th & 26th April, 2008 & 21.5.2008) alongwith letter dated 21.5.2008 received from the Principal of the Instt. and noted the following:-

1. (a) The shortage of teaching faculty is 32.74% (56/171)
 - i) Professor-5 (Pharma-1, Psychiatry-1, ENT-1, OBGY-1, Dentistry-1,)
 - ii) Assoc. Prof.-15 (Anatomy 2, Physiology 2, Pharmac 1, Patho 1, FM 1, TB 1, Surgery 3, OBGY 1, Radiology 2, Dentistry 1)
 - iii) Asstt.Prof. - 20 (Pharma 3, Pharma Chem 1, Patho 3, Medicine 2, Derma 2, Psychiatry 1, Surgery 1, OBGY 3, Anaesthesia 2, Radiology 2, Dentistry 1)
 - iv) Tutor- 16 (Anatomy 3, Physiology 3, Biochemistry 1, Pharmacology 2, Pathology 3, Community Med 4)
- (b) The shortage of Residents is : 13.91% (16/115)
 - (i) Senior Resident-9 (Medicine 2, Pediatrics 1, Derma 1, Surgery 2, Radiology 3)
 - (ii) Junior Residents -7 (Medicine 2, Derma 3, ENT 1, Anaesthesia 1)
2. Clinical material is grossly inadequate as under:-

	Day of Inspection
O.P.D. attendance	291
Casualty attendance	-
Number of admissions / discharge	13
Bed occupancy%	54.26
Operative work	
Number of major surgical operations	1
Number of minor surgical operations	-
Number of normal deliveries	-
Number of caesarian Sections	-
<u>Radiological Investigations</u>	
X-ray	6
Ultrasonography	2
Special Investigations	1
C.T. Scan	2
<u>Laboratory Investigations</u>	
Biochemistry	21
Microbiology	8
Serology	8

Parasitology	3
Haematology	4
Histopathology	-
Cytopathology	-
Others	-

General Medicine			General Surgery		
Ward No.	Beds	Occupancy Inspection day	Ward No.	Beds	Occupancy Inspection day
MMW	120	54	Male	120	97
FMW	60	38	Female	60	46
Pediatrics			Orthopedics		
Ward No.	Beds	Occupancy Inspection day	Ward No.	Beds	Occupancy Inspection day
Two	90	3	Male	60	50
			Female	30	23
TB & Chest			Ophthalmology		
Ward No.	Beds	Occupancy Inspection day	Ward No.	Beds	Occupancy Inspection day
Male	20	15	Male	20	11
Female	10	3	Female	10	8
Skin & VD			ENT		
Ward No.	Beds	Occupancy Inspection day	Ward No.	Beds	Occupancy Inspection day
Male	10	5	Male	20	-
Female	5	-	Female	10	8
Psychiatry			Obstetrics & Gynecology		
Ward No.	Beds	Occupancy Inspection day	Ward No.	Beds	Occupancy Inspection day
Male	10	6	Gynec	36	40
Female	5	-	Obstetric	54	17
Casualty & Intensive Care					
Ward No.	Beds	Occupancy Inspection day	Ward No.	Beds	Occupancy Inspection day
ICCU	8	8	Casualty	25	8
ICU(Med)	6	3	NICU	4	-
ICU(Surg)	9	9	PICU	4	-
Burns	6	3			

3. RHTC, Raghudevapuram building is taken on lease for 30 years which is not as per Council norms.
4. The Urban Health Center is owned by the State Govt. and is not under the control of the Principal of the college which is not as per norms.
5. Only 4 static units are available in Radio-Diagnosis department against the requirement of 6 as per Regulations.
6. Postmortems are not permitted by the State Govt. However, the arrangements made for teaching autopsies for students has not been shown to the inspecting team.
7. Other deficiencies as pointed out in the inspection report.

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

Govt. not to renew the permission for admission of 6th batch of MBBS students for the academic session 2008-2009 at G.S.L. Medical College & Hospital, Rajahmundry.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided not to approve G.S.L. Medical College & Hospital, Rajahmundry for the award of MBBS degree granted by N.T.R. Medical University, Vijayawada.

69. Santhiram Medical College, Nandyal - Renewal of permission for admission of 4th batch of students for the academic session 2008-09.

Read: The Council Inspectors report (09th June, 2008) for renewal of permission for admission of 4th batch of students for the academic session 2008-2009 at Santhiram Medical College, Nandyal.

The minutes under this item may be read alongwith item No. 7.

70. M.E.S. Medical College, Malappurama – Renewal of permission for admission of 5th batch of students for the academic session 2008-2009.

Read: The Council Inspectors report (27th & 28th May, 2008) for renewal of permission for admission of 5th batch of students for the academic session 2008-2009 at M.E.S. Medical College, Malappurama.

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 May, 2008) and decided to recommend to the Central Govt. to renew the permission for admission of 5th batch of 100 (One Hundred) MBBS students at M.E.S. Medical College, Malappurama for the academic session 2008-09.

71. Establishment of new medical college at Ammapettai, Nellikuppam, Tamilnadu by Sri Balaji Educational and Charitable Public Trust.

Read: The Inspection report (30th & 31st May, 2008) for grant of Letter of Permission for establishment of new medical college at Ammapettai, Nellikuppam, Tamilnadu by Sri Balaji Educational and Charitable Public Trust u/s 10(A) of the IMC Act, 1956.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the Council Inspectors report (30th & 31st May, 2008) and noted the following:-

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

(a) The following faculty members have not been counted while computing faculty deficiency for reasons given as under:-

Sl. No.	Name	Designation	Department	Remarks
1.	Dr. P. Samudram	Professor	Biochemistry	He possesses only 3 year 3 months experience as Assoc. Prof. against the requirement of 4 years as per Regulations. He possesses M.Sc. from Science Faculty. Hence, not eligible.
2.	Dr. R. Kannan	Asstt.Prof.	Anaesthesia	As per his declaration form, he has no experience as Resident. Hence, not eligible.
3.	Dr. Omer Farook	Asstt.Prof.	Anaesthesiology	As per his declaration form, he has no experience as Resident. Hence, not eligible.
4.	Dr. J. Srinivasan	Asstt.Prof.	Dentistry	As per his declaration form, he has no experience as Resident.

				Hence, not eligible.
5.	Dr. Alfred Rajan	Asstt.Prof.	Orthopaedics	In his declaration forms, he has shown experience of 3 years as PG student and not as Resident required as per Regulations.
6.	Dr. Rahul B. Deshmukh	Asstt.Prof.	Radiology	In his declaration forms, he has shown experience of 3 years as PG student and not as Resident required as per Regulations.
7.	Dr. Raju G.	Asstt.Prof.	General Surgery	In his declaration forms, he has shown experience of 3 years as PG student and not as Resident required as per Regulations.
8.	Dr. C. Raghunath	Asstt.Prof.	General Medicine	In his declaration forms, he has shown experience of 3 years as PG student and not as Resident required as per Regulations.
9.	Dr. R. Sivakumar	Asstt.Prof.	General Medicine	In his declaration forms, he has shown experience of 3 years as PG student and not as Resident required as per Regulations.
10.	Dr. C. Arshad Akeel	Asstt.Prof.	General Medicine	In his declaration forms, he has shown experience of 3 years as PG student and not as Resident required as per Regulations.
11.	Dr. Anamika Aluri	Asstt.Prof.	Biochemistry	In her declaration forms, she has shown experience of 3 years as PG student and not as Resident required as per Regulations.
12.	Dr. Manisha Agarwal	Asstt.Prof.	Obst. & Gynae.	In her declaration forms, she has shown experience of 3 years as PG student and not as Resident required as per Regulations. Hence, not eligible.
13.	Dr. G.Bava Fathurudeen	Sr.Resident	Paediatrics	In his declaration forms, he has shown experience of 1 year as PG student and not as Resident required as per Regulations.
14.	Dr. Nirmala Subramaniam	Sr. Resident	OBGY	In her declaration forms, she has shown experience of 2 years as PG student and not as Resident required as per Regulations. Hence, not eligible.

(b) In view of the above, the shortage of the teaching faculty is 24.1.0% (i.e. 16 out of 66) as under:-

- i) Professor : 2 (Physiology -1 & Biochemistry -1)
 - ii) Associate Professor :3 (Anatomy -2 & Biochemistry-1)
 - iii) Assistant Professor: 11 (Biochemistry-1, Medicine -3, Surgery -1, Orthopaedics -1, Obst. & Gynae. -1, Anaesthesia -2, Radio diagnosis-1 & Dentistry -1)
 - iv) Tutor : Nil
2. Nurses have been accommodated in top floor of the Girls Hostel in the Old hospital building in the Campus. In 4 dormitory halls having capacity of 15 each which is not adequate.
 3. Registration & Medical Record Section- Follow up services is not available.
 4. In Anatomy department, there are no cadavers. Space has been provided for research laboratory but it is yet to be equipped.
 5. In Physiology department, there is a research laboratory provided and is yet to be equipped.
 6. In Biochemistry department, space is provided for research laboratory.
 7. Other deficiencies as pointed out in the inspection report.

In view of above and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Ammapettai, Nellikuppam, Tamilnadu by Sri Balaji Educational and Charitable Public Trust u/s 10(A) of the IMC Act, 1956.

72. S.C.B. Medical College, Cuttack - Renewal of permission for admission of 6th batch of students against the increased intake i.e. from 107 to 150 for the academic session 2008-2009.

Read: The Council Inspectors report (16th & 17th April, 2008) alongwith additional information received from the Principal, S.C.B. Medical College, Cuttack vide letter dated 07.06.2008 alongwith declaration forms and joining reports of 9 Associate professors for renewal of permission for 6th batch of students against the increased intake i.e. from 107 to 150 for the academic session 2008-2009 u/s 10(A) of the IMC Act, 1956 and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W..

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 (16th & 17th April, 2008) alongwith additional information received from the Principal, S.C.B. Medical College, Cuttack vide letter dated 07.06.2008 alongwith declaration forms and joining reports of 9 Associate Professors and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 6th batch of MBBS students against the increased intake i.e. from 107 to 150 at S.C.B. Medical College, Cuttack for the academic session 2008-2009.

73. Continuance of recognition of MBBS degree granted by Baba Farid Univesity of Health Sciences, Faridkot in respect of students being trained at Government Medical College, Amritsar.

Read: The Compliance Verification Inspection report (10th June, 2008) alongwith Council Inspectors report (17-18 January, 2008) for continuance of recognition of MBBS degree granted by Baba Farid Univesity of Health Sciences, Faridkot in respect of students being trained at Government Medical College, Amritsar.

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 (10th June, 2008) alongwith Council Inspectors report (17-18 January, 2008) and noted the following:-

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

(a) Faculty more than 17.7 % (i.e. 41 out of 231) as under:

Associate Professor – 8 (Anatomy-1, Biochemistry-1, Pathology-2, Forensic Medicine-1, Community Medicine-1, Paediatrics-2)

Asstt. Professor – 33 (Anatomy-2, Pathology-4, Pharmacology-2, Pharma Chemist-1, Forensic Medicine-2, Community Medicine-6, Epidemiologist-1, T.B & Chest-1, Skin & Vd-1, Psychiatry-1, Paediatrics-2, Surgery-4, Orthopedics-1, OBG-3, 1-ANMO, 1-MWO)

(b) The shortage of Residents more than 8.6 % (10 out of 115)

Sr. Resident – 10 (Paediatrics-3, General Surgery-2, Orthopedics-1, Ophthalmology-1, OBG-3)

2. Clinical material is inadequate as under:-

	Daily Average	Day of Inspection
Bed occupancy%	63%	61%
Laboratory Investigations		
Parasitology	--	--
Haematology	--	--
Histopathology	--	--
Cytopathology	--	--

- 3. Auditorium is still under renovation.
- 4. No common rooms are available for boys and girls.
- 5. No speech therapist/ Audiologist is available as there is no sanctioned post.
- 6. Operation Theatre: The Ophthalmology and ENT OT having 3 tables each and are not well equipped. The OB and GY OT is in a very bad shape and poorly maintained.
- 7. NICU and PICU under renovation. One room with 10 beds in main ward with essential equipments is being used as ICU. No GICU is available.
- 8. Labour Room: There are 4 tables available for clean cases in the labour room. No tables are available for septic labour. No beds are available for eclampsia cases.
- 9. B & W Ultrasound machine with 3 probes is under installation. No CT Scan is available.
- 10. In Biochemistry department, demonstration room in Physiology Deptt. is shared by Biochemistry Deptt.
- 11. No separate demonstration halls are available in Pathology department.
- 12. In Microbiology Department, there is no demonstration room and there is no practical labs.
- 13. Books available in the following departmental library are inadequate- TB &CD 30 books; Psychiatry 50 books ; Orthopedics 50 books ;ENT 56 Books; Anesthesia 35 books and Radiodiagnosis 30 books.
- 14. Other deficiencies as 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 issue a show cause notice to the authorities of Govt. Medical College, Amritsar as to why the recognition for the award of MBBS degree should not be withdrawn u/s 19 of the IMC Act, 1956 and further admissions should not be stopped and further decided that the institute be asked to submit its compliance within a period of 1 month. Copy of the letter be also marked to Secretary (Medical Education), DME of the concerned State Govt., Registrar of the University to which the college is affiliated and also to the member of the MCI representing the State where the college is located.

74. **Continuance of recognition of MBBS degree granted by Baba Farid University of Health Sciences, Faridkot in respect of students being trained at Govt. Medical College, Patiala.**

Read: The Compliance Verification Inspection report (10th June, 2008) alongwith Council Inspectors report (24-25th March, 2008) for continuance of recognition of MBBS degree granted by Baba Farid Univesity of Health Sciences, Faridkot in respect of students being trained at Govt. Medical College, Patiala.

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 (10th June, 2008) alongwith Council Inspectors report (24-25th March, 2008) and noted the following:-

1. (a) The shortage of teaching staff is 19.56% (i.e. 45 out of 230) as under:-

1. Prof.	02	Forensic Medicine-1 & Skin & V.D-1
2. Assoc. Prof.	09	Biochemistry-1, Forensic Medicine -1, Skin & V.D – 1, Microbiology-2, Community Medicine-2 & Anaesthesia- 2
3. Asstt. Prof.	28	Anatomy -4,Physiology -2, Pharmacology -2, Pathology -2, Microbiology -2, Forensic Medicine-2,

		Community Medicine -4, Paediatrics -2, Psychiatry - 1, General Surgery -2, Orthopedics 3 & Anaesthesia - 2
4. Tutor	06	Microbiology-2, Community Medicine-4

- (b) Shortage of Resident is 6.76% (9 out of 133) as under:-
- (i) Sr. Resident 06:- (Paediatrics -1 & ENT -1, Orthopedics-1 & Radio-Diagnosis-3)
(ii) Jr. Resident 03:- (Skin & V.D-3)
- (c) 88 Teachers are reported to have gone on vacation as per the details furnished by the college and their names are included that in computing the faculty.
- Soundproof and Air-conditioned Audiometry room is made available with one old machine. A new machine has been ordered and is in the process of procurement. However no Technician is available.
 - C.T. Scan is not available.
 - 10 Computers have been installed in the OPD registration counter but are yet to be made functional. At present, only manual registration is being followed for OPD registration, Indoor admission and MRD. There is no trained personnel available and ICD X indexing is not followed.
 - 4 horizontal Autoclave and one bowl sterilizer are available in the CSSD. Procurement of ETO and Ultrasonic instrument cleaner is under process and orders have been placed for the purchase.
 - Hostel accommodation for girls in RHTC is not available.
 - Other deficiencies as 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 issue a show cause notice to the authorities of Govt. Medical College, Patiala as to why the recognition for the award of MBBS degree should not be withdrawn u/s 19 of the IMC Act, 1956 and further admissions should not be stopped and further decided that the institute be asked to submit its compliance within a period of 1 month. Copy of the letter be also marked to Secretary (Medical Education),DME of the concerned State Govt., Registrar of the University to which the college is affiliated and also to the member of the MCI representing the State where the college is located.

75. Continuance of recognition of MBBS degree granted by Baba Farid University of Health Sciences, Faridkot in respect of students being trained at Guru Govind Singh Medical College, Faridkot.

Read: The Compliance Verification Inspection report (10th June, 2008) alongwith Council Inspectors report (29-30th November, 2007) for continuance of recognition of MBBS degree granted by Baba Farid Univesity of Health Sciences, Faridkot in respect of students being trained at Guru Govind Singh Medical College, Faridkot.

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 (10th June, 2008) alongwith Council Inspectors report (29-30th November, 2007) and noted the following:-

1. (a) Shortage of teaching faculty is 34.02% (33/97) as under:-

Professors	8	Anatomy-1, Physiology-1, Microbiology-1, Community Medicine-1, Orthopaedics-1, ENT-1, Obst. & Gynae.-1, Anesthesia-1
Associate Professors	10	Anatomy-1, Pharmacology-1, Microbiology-1, General Medicine-2, General Surgery-1, Paediatrics-1, Obst. & Gynae-1, Radio-diagnosis-1, Dentistry-1
Assistant Professors	15	Anatomy-1, Pharmaceutical Chemistry-1, Community Medicine-3, Paediatrics-2, TB & Chest-1, General Surgery-2, Orthopaedics-1,

		Ophthalmology-1, Obst. & Gynae.-2, Dentistry- 1
Tutor	Nil	

(b) Shortage of Residents is 27.02% (20/74) as under:-

Senior Residents	4	Anaesthesia-3, Radio-diagnosis- 1
Junior Residents	16	General Medicine-1, Paediatrics-1, General Surgery-8, Orthopaedics-4, ENT-1, Dentistry-1.

- The Professor and Head of Medicine Department is also officiating as Medical Superintendent which is not as per Regulations.
- Clinical material is inadequate as under:-

OPD attendance	598	645
Bed occupancy %	48%	61%
<u>Operative Work</u>		
-Number of major surgical op.	8	8
-No. of minor surgical operation	3	4
- No. of normal deliveries	13 per month	-
- No. of caesarian section	7	-
<u>Radiological Investigations</u>		
- X-rays	51	54
-Ultra sonography	15	20
-Special investigations	1-2	01
- CT Scan	Started from 3.6.2008	02
<u>Laboratory Investigations</u>		
- Biochemistry	58	62
- Microbiology	07	08
- Serology	20	22
- Para-sitology	04	05
- Haematology	240	258
- Histopathology	6-7	07
- Cytopathology	04	05
- Others	-	-

- Central OPD Registration Counter is manual. OPD is located in the special rooms of the hospital. The earmarked OPD of the hospital is being utilized by the administrative staff of Baba Farid University of Health Sciences, Faridkot. Deficiency remains as it is.
- Anatomy Department: There is no cooling cabinet available. Only space has been provided for Research Laboratory. Deficiency remains as it is.
- Physiology departmental library has very old books. Deficiency remains as it is.
- Biochemistry Department: The number of books available in the departmental library of Biochemistry department are inadequate. Deficiency remains as it is. Only space has been provided for Research Laboratory. Deficiency remains as it is.
- Pathology Department: There is one student's lab common for histopathology, clinical pathology and haematology, which has inadequate seats. There is no research lab available. Only space has been provided. No. of books in the departmental library are inadequate.
- Microbiology Department: There is no research lab available. Only space has been provided.
- Inadequate number of books are available in the departmental libraries of Skin & VD, Psychiatry and Obst. & Gynae.
- There are 14 beds available in casualty against the requirement of 20 beds as per Regulations. Resuscitation equipment is inadequate. The casualty is inadequately

- equipped. No central oxygen and central suction facilities available in the casualty. Life saving equipments are not available in the casualty.
12. No ultrasound machine is available in the OBGY department.
 13. License of the Blood Bank has not been renewed since 01.01.1998. Deficiency remains as it is.
 14. CSSD has no bowl sterilizer, no glove inspection machine and no instrument washing machine.
 15. Central laundry has inadequate staff and no drier. Deficiency remains as it is.
 16. Intercom facility is not available. Deficiency remains as it is.
 17. Hospital kitchen is not available. Deficiency remains as it is.
 18. Para medical and nursing staff are inadequate and not as per MCI norms. Deficiency partly rectified.
 19. Auditorium is not available. Deficiency remains as it is.
 20. Examination hall is not available. Deficiency remains as it is.
 21. There are only 2 Indian journals are available against the requirement of 70 Indian & 30 Foreign journals as per Regulations. Deficiency remains as it is.
 22. Training courses are not conducted by the Medical Education Unit. Deficiency remains as it is.
 23. Other deficiencies as 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 issue a show cause notice to the authorities of Guru Govind Singh Medical College, Faridkot as to why the recognition for the award of MBBS degree should not be withdrawn u/s 19 of the IMC Act, 1956 and further admissions should not be stopped and further decided that the institute be asked to submit its compliance within a period of 1 month. Copy of the letter be also marked to Secretary (Medical Education), DME of the concerned State Govt., Registrar of the University to which the college is affiliated and also to the member of the MCI representing the State where the college is located.

76. Enhancement of MBBS seats in Vardhman Mahavir Medical College & Safdarjung Hospital from 100 to 154, Lady Hardinge Medical College 130 to 150, University College of Medical Sciences 100 to 118.

Read: The the letter dated 28.04.2008 from the Principal & Medical Superintendent, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi and letter dated 02.06.2008 from the Dean (Medical), University of Delhi, Faculty of Medical Sciences, Delhi with regard to implementation of 27% reservation for OBC by enhancement of seats from 100 to 154 at Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi; 130 to 150 at Lady Hardinge Medical College, New Delhi and 100 to 118 at University College of Medical Sciences, Delhi.

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 28.04.2008 from the Principal & Medical Superintendent, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi and letter dated 02.06.2008 from the Dean (Medical), University of Delhi, Faculty of Medical Sciences, Delhi with regard to implementation of 27% reservation for OBC by enhancement of seats from 100 to 154 at Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi; 130 to 150 at Lady Hardinge Medical College, New Delhi and 100 to 118 at University College of Medical Sciences, Delhi. After due deliberations and considering the relevant provisions of IMC Act 1956 and various Regulations framed therein, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided as under:-

(a) Vardhman Mahavir Medical College & Safdarjung Hospital , New Delhi:

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that Section 10A pertaining to Permission for establishment of new medical college, new course of study etc. reads as under:-

"10A(1)(b) no medical college shall –

- (i) *open a new or higher course of study or training (including a postgraduate course of study or training) which would enable a student of such course or training to qualify himself for the award of any recognized medical qualification; or*

- (ii) *increase its admission capacity in any course of study or training (including a postgraduate course of study or training),*

except with the previous permission of the Central Government obtained in accordance with the provisions of this Section.

Explanation 1: For the purposes of this section, “person” includes any University or a Trust but does not include the Central Government.....”

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that at its earlier meeting held on 13th & 14th June, 2007 it was decided to recommend that Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi be recognized for the award of MBBS degree granted by Guru Gobind Singh Indraprastha University and included in the 1st Schedule to the IMC Act, 1956 restricting the number of admissions to 100 students annually.

It was also observed that the Principal & Medical Superintendent of Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi has stated in the letter that the current MBBS intake in the institute is going to increase to 154 per year. However, as per the present Regulations in force, the maximum intake capacity for a medical college which can be permitted is 150.

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 that although Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi being owned by the Central Govt. may be exempted from the provisions of Section 10A, no such exemption is available to any medical college from following the Minimum Standard Requirements for the Medical College for 150 Admissions Annually Regulations, 1999.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided to advise the authorities of Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi that the intake capacity may be increased to 150 only in conformity with the Minimum Standard Requirements for the Medical College for 150 Admissions Annually Regulations, 1999 and the Central Govt. may further be requested to direct the authorities of Vardhman Mahavir Medical College, New Delhi that the provisions of Minimum Standard Requirements for the Medical College for 150 Admissions Annually Regulations, 1999 may be followed while increasing the admission capacity of undergraduate students for the academic session 2008-09 from 100 to 150.

(b) Lady Hardinge Medical College, New Delhi:

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that Section 10A pertaining to Permission for establishment of new medical college, new course of study etc. reads as under:-

“10A(1)(b) no medical college shall –

- (i) *open a new or higher course of study or training (including a postgraduate course of study or training) which would enable a student of such course or training to qualify himself for the award of any recognized medical qualification; or*
- (ii) *increase its admission capacity in any course of study or training (including a postgraduate course of study or training),*

except with the previous permission of the Central Government obtained in accordance with the provisions of this Section.

Explanation 1: For the purposes of this section, “person” includes any University or a Trust but does not include the Central Government.....”

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that Lady Hardinge Medical College, New Delhi

was established in 1916 by the Central Govt. and is recognized by the Medical Council of India with annual intake capacity of 130 students. The periodical inspection of the infrastructural, teaching and other facilities available at this college was fallen due in 1998 by the Council appointed Inspector for continuance of recognition to this college for award of MBBS degrees by the affiliating University to the students trained in this college. Despite fixation of dates of the periodical inspection by the Council many times, it kept on being postponed on the request of the college. It was fixed for 9th & 10th May, 2003 and accordingly inspectors were appointed by the Council. The college vide its fax dated 6.5.2003, while requesting for postponement of periodical inspection, had indicated convenient dates after July, 2003. The reasons for the postponement mentioned in the said letter were that there was no permanent Principal and MS of the college and associated hospitals on superannuation of the incumbents to the post and the other being summer vacation upto Mid July in the college.

It was further observed that thereafter the Executive Committee at its meeting held on 28.03.2004 considered the request for postponement of the inspection for continuance of recognition of MBBS degree granted by Delhi University in respect of students being trained at Lady Hardinge Medical College, New Delhi and 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 further decided that no further extension be given to the College.

As no communication was received from the said college, an inspection of the college was arranged to be carried out on 04th & 05th March, 2005, however the Principal & Medical Superintendent, LHMC, New Delhi vide its letter dt. 02nd May, 2005 had again requested the Council to postpone the inspection for a few months by giving the reason "that a discussion was held in the Ministry of Health and Family Welfare specially with reference to **the shortage of faculty in the college** and an assurance has been given by the Health and Family Welfare that the shortage can be resolved in about six months or more, as this shortage was fall out of certain restrictions on fresh recruitments, which can be lifted now. The Ministry is writing to the U.P.S.C. for filling up the vacant posts."

In light of the request of the college, the college authorities vide Council office letter dated 16.02.2006 was informed that the inspection would be carried out in July, 2006 and no further extension of time for carrying out the inspection will be granted.

Accordingly, an inspection of the said college was again arranged for 13th & 14th October 2006 but the Principal of the college vide its letter dated 07.10.2006 had once again requested the Council for postponement of the said inspection on the ground of Parliamentary session.

Subsequently, another inspection of the said college was once again arranged for 27th & 28th December 2006 but the same was again postponed on the request made by the Principal of the said college vide its letter dated 22.12.2006, till winter vacations was over.

Similarly, the Council office had arranged inspections of the said college many times i.e. for 5th & 6th June, 2007, 28th & 29th Sept., 2007 and on 25th & 26th Oct., 2007, however no inspection could materialize due to the request of the college.

In view of above, the matter was placed before the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee at its meeting held on 29.12.2007 and it was decided as under: -

"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 20.10.2007 received from the Principal, Lady Hardinge Medical College, New Delhi with regard to postponement of the inspection for continuance of recognition of MBBS degree granted by Delhi University in respect of students being trained at Lady Hardinge Medical College, New Delhi and observed that the institute is asking repeatedly for postponement of inspection under one pretext or another whenever the inspection is being arranged and decided to schedule the inspection of Lady Hardinge Medical College, New Delhi within the period of six weeks and directed the office to intimate the institute accordingly."

In light of the aforesaid decision of the Committee, the Principal of the said college vide Council office letter dated 21.01.2008, was communicated the decision of the Committee for its information.

It is also pertinent to mention here that no further communication has been received from the college in this regard.

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 that although Lady Hardinge Medical College, New Delhi being owned by the Central Govt. may be exempted from the provisions of Section 10A, no such exemption is available to any medical college from following the Minimum Standard Requirements for the Medical College for 150 Admissions Annually Regulations, 1999.

It was further decided that the Central Govt. may be requested to direct the authorities of Lady Hardinge Medical College, New Delhi that the provisions of Minimum Standard Requirements for the Medical College for 150 Admissions Annually Regulations, 1999 may be followed while increasing the admission capacity of undergraduate students for the academic session 2008-09 from 130 to 150.

(c) University College of Medical Sciences, Delhi:

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that Section 10A pertaining to Permission for establishment of new medical college, new course of study etc. reads as under:-

“10A(1)(b) no medical college shall –

- (i) open a new or higher course of study or training (including a postgraduate course of study or training) which would enable a student of such course or training to qualify himself for the award of any recognized medical qualification; or*
- (ii) increase its admission capacity in any course of study or training (including a postgraduate course of study or training),*

except with the previous permission of the Central Government obtained in accordance with the provisions of this Section.

Explanation 1: For the purposes of this section, “person” includes any University or a Trust but does not include the Central Government.....”.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that the University College of Medical Sciences is a constituent unit of Delhi University.

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 that Explanation-1 of Section 10A of the I.M.C. Act, 1956 makes it clearly evident that Delhi University, although it may be a centrally funded University, is not included within the definition of Central Govt. Thus, the provisions of Section 10A of the I.M.C. Act, 1956 are squarely applicable to a medical college which is a constituent unit of Delhi University. It was further decided that the authorities of University College of Medical Sciences, Delhi may be advised accordingly and may be directed to apply for increase of seats in accordance with the Scheme contained within the provisions of Section 10A of the I.M.C. Act, 1956.

Office Note: As the counselling for admission has to begin soon, the office is directed to send the communication to the authorities of University College of Medical Sciences, Delhi, Lady Hardinge Medical College, New Delhi and Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi immediately.

77. Award of Courier Services in the Council Office.

Read: The matter with regard to award of Courier Services 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 following recommendations of the Purchase Committee:-

"The Committee comprising of Dr. P. Prasannaraj, Joint Secretary; Sh. Ashok Kr. Harit, Deputy Secretary (Admn.); Dr. Davinder Kumar, Deputy Secretary & Sh. A.K. Ahluwalia, Accounts Officer, met in the Council office on 09/06/2008 at 2.30 p.m. for opening of tender for Courier Services.

Total three tenders are received from M/s Sky Lark Express, M/s DTDC & BlazeFlash Courier. Representatives from all the three firms were present at the tender opening meeting & signed in the tender register.

A comparative statement has been prepared. M/s Sky Lark Express has quoted the total product for one year amounting to Rs.38,982.60 which is the lowest amongst all the three tenders."

78. Award of Canteen Services in the Council Office.

Read: The matter with regard to award of Canteen Services 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 following recommendations of the Purchase Committee:-

"The Committee consisting of the following was constituted by the Secretary on 28.05.2008 to open and prepare the comparative statement of the tenders received for award of Canteen Contract:-

1. Dr. P. Prasannaraj, Joint Secretary
2. Sh. Ashok Kumar Harit, Deputy Secretary (Admn.)
3. Dr. Davinder Kumar, Deputy Secretary
4. Sh. A.K. Ahluwalia, Accounts Officer.

The Committee noted that only tender is received from M/s. Yadav Caterers, New Delhi. It has also been observed by the Committee that as per terms & conditions of the tender the successful tenderer will be decided on the basis of license fee offered by the tenderer which was to be filled in the Annexure-A attached to the tender set and the only tenderer has not mentioned any license fee in the Annexure A. Since, the tenderer was not fulfilling the basic requirement of offering of license fee, the Committee recommended to reject the tender of M/s. Yadav Caterers."

79. Departmental Promotion Committee to the post of Stenographer Grade-II in the office of the Medical Council of India.

Read: The recommendations of the Departmental Promotion Committee with regard to promotion for the post of Stenographer Grade-II 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 Departmental Promotion Committee (DPC) meeting held on 12.06.2008 for the post of Stenographer Grade-II in the office of the Medical Council of India as under:-

"As per Recruitment Rules, 8 years regular service as Stenographer Grade-III is required for promotion to the post of Stenographer Grade-II. It has been observed that there are four posts of Stenographer Grade-II lying vacant in the Council. After perusal of the records/data of Shri Kundan Singh, Mrs. Puja Mehta, Ms. Manju Rani, Sh. Mukesh Kumar Sharma & Ms. Swati Handa, submitted before the Committee, the Committee noted that only one candidate is fulfilling the required criteria of 8 years experience viz. Shri Kundan Singh. The Annual Confidential Reports of Shri Kundan Singh do not contain any adverse remarks and no vigilance case is pending against him. The Committee recommends the name of Shri Kundan Singh for promotion to the post of Stenographer Grade-II."

80. **Rohilkhand Medical College & Hospital, Pilibhit, Bareilly – Renewal of permission for admission of 3rd batch of students for the academic session 2008-09.**

Read: The Compliance Verification Inspection report (20th May, 2008) alongwith Council Inspectors report (1st -2nd April, 2008) for renewal of permission for admission of 3rd batch of students for the academic session 2008-2009 at Rohilkhand Medical College & Hospital, Pilibhit, Bareilly.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and the Executive Committee of the Council considered the Compliance Verification Inspection report (20th May, 2008) alongwith Council Inspectors report (1st -2nd April, 2008) and noted the following:-

1.(a) The following teachers have been found to be working at more than one medical college simultaneously:

1. Dr.Subrata Ghosh, Assoc.Prof. of Anatomy

Name of the college	Date of Joining	Date of Inspection
1. Kalinga Instt. of Medical Sciences, Bhubaneshwar	22.7.2007	16.4.2008
2. Rohilkhand Medical College & Hospital, Bareilly	1.2.2008	1.4.2008

2. Dr.Anjoo Yadav, Asstt.Prof. of Anatomy

Name of the college	Date of Joining	Date of Inspection
1. Rama Medical College & Hospital, Kanpur	16.2.2008	7.6.2008
2. Rohilkhand Medical College & Hospital, Bareilly	19.10.2007	1.4.2008

(b) The shortage of teaching staff required at present stage is as under:-

Faculty : More than 18% (22 out of 116) as under:-

- i) Professor :06 (Physiology -1, Biochemistry -1, Pharmacology -1, Community Medicine -1, Paediatrics – 1 & Orthopaedics -1)
- ii) Associate Prof. :12 (Anatomy -1, Physiology -1, Pathology -2, Community Medicine -1, General Medicine -2, Paediatrics -1, Orthopaedics -1, Anaesthesia -2 & Radio – Diagnosis -1)
- iii) Assistant Prof. :04 (Community Medicine -1, Psychiatry -1, Obst. & Gynae. -1 & Anaesthesia -1)
- iv) Tutor :Nil

(b) Residents : More than 5% (5 out of 82) as under:-

- i) Sr. Residents :03 (Psychiatry -1 & Radio-Diagnosis -2)
- ii) Jr. Residents :02 (General Medicine -2)

(c) Some of the faculty members have not participated in clinical and operative work of the hospital and institution.

(d) The faculty in various department with the same designation are having different pay scale.

(e) In a few departments senior residents are found to be drawing more salary as compared to that of teaching faculty.

2. Clinical Material is inadequate as under:-

	Day of Inspection 20.05.2008
O.P.D. attendance	691
Casualty attendance	13
Number of admissions / discharge	50/34
Bed occupancy%	74 %
Operative work	
Number of normal deliveries	00
Number of caesarian Sections	00

Note: 1. There were no deliveries on the day of inspection.

2. Although the institute has claimed 86% bed occupancy on the day of inspection, many children in Paediatric ward were found playing who did not merit admission. Some patients in Medicine wards were of poor clinical significance and not of good quality teaching material. Thus actual bed occupancy was observed to be 74 %.
3. 90 patients were found to be admitted on 19.05.2008 – i.e. previous day.
4. Quality of the patients admitted in different wards were found to be of little clinical significance.
5. Time of admission is being recorded and it has been incorporated into the admission computer.
6. There has been no appreciable increase in the number of deliveries :-
 23.04.2008 - 02
 30.04.2008 - 01
 05.05.2008 - 02
 12.05.2008 - 00
 19.05.2008 - 00
 20.05.2008 - 00 (upto 1 pm)
7. Other deficiencies as pointed out in the inspection report.

In view of above and Govt. of India letter dt. 15/3/2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council decided to recommend to Central Govt. not to renew the permission for admission of 3rd batch of students for the academic session 2008-2009 at Rohilkhand Medical College & Hospital, Pilibhit, Bareilly.

81. Increase of MBBS seats from 100 to 150 at N.K.P. Salve Instt. of Medical Sciences & Lata Mangeshkar Hospital, Nagpur.

Read: The Council Inspectors report (28th & 29th March, 2008, 10th May, 2008 & 20th May, 2008) for grant of letter of permission for Increase of MBBS seats from 100 to 150 at N.K.P. Salve Medical Sciences & Lata Mangeshkar Hospital, Nagpur.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council while considering the inspection report of the institute at its meeting held on 12.5.2008 had decided as under:-

“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 (10th May, 2008) along with Council Inspectors report (28th & 29th March, 2008) and decided to recommend to the Central Govt. to issue Letter of Permission for increase of seats from 100 to 150 at N.K.P. Salve Instt. of Medical Sciences & Lata Mangeshkar Hospital, Nagpur for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.”

Thereafter, the complaints were received in the Council Office wherein it was decided to verify the teaching faculty, the communication to the Central Govt. was withheld and another inspection to verify teaching faculty and clinical material available at the institute by way of inspection which was conducted by the Council Inspectors on 20.5.2008.

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 (28th & 29th March, 2008, 10th May, 2008 & 20th May, 2008) and noted the following:-

1.(a) The shortage of teaching faculty is 28.4%(i.e. 48 out of 169) as under :-

- | | | | |
|-------|---------------------|----|--|
| (i) | Professor | 05 | (Biochemistry –1, FMT –1, Ortho –1, ENT-1, OBGY-1) |
| (ii) | Associate Professor | 11 | (Physiology -3, Biochemistry -1, Microbiology -1 , Gen.Med-1, TB&Chest-1, Psychiatry-1, Pediatrics-1, Ophthal-1, Anaesthesia-1) |
| (iii) | Assistant Professor | 21 | (Anatomy -2, Physiology -1, Biochemistry -1, Forensic Medicine -1, General Medicine -5, General Surgery –5, Pediatrics-1,Orthopaedics-1,Ophthal-1, OBGY-3) |
| (iv) | Tutor | 11 | Anatomy-5, Physiology-2, Biochemistry-2, Pathology-1, Community Medicine-1, |

(b) The shortage of Residents is 21%(i.e. 18 out of 85) as under :-

- | | | | |
|------|--------------|----|--|
| (i) | Sr. Resident | 05 | (TB & Chest-1, Pediatrics –2, Gen.Surgery –1, Ortho-1) |
| (ii) | Jr. Resident | 13 | (Derma-1, Gen.Surg 4, Ortho-6, Ophthal-1, OBGY-1) |

- 2. There is overcrowding of beds in all the departments.
- 3. Clinical material is grossly inadequate as under:-

	Day of Inspection 20 / 05/08
O.P.D. attendance	417
Casualty attendance	04
Bed occupancy%	55%
Operative work	09
Number of major surgical operations	13
Number of minor surgical operations	01
Number of normal deliveries	--
Number of caesarian Sections	
Radiological Investigations	
X-ray	
Ultrasonography	57
Special Investigations	26
C.T. Scan	02
	05
Laboratory Investigations	
	161
Biochemistry	10
Microbiology	39
Serology	05
Parasitology	172
Haematology	05
Histopathology	10
Cytopathology	
Others	

- o The OPD attendance was 417 and the bed occupancy was 55% on the day of the inspection.
- o Although the institution claims to have 80% bed occupancy on the day of inspection, on verification, the bed occupancy was found to be 55%.
- o The Laboratory work load was found to be low on the day of the inspection.

4. Blood available in the Blood Bank and units used in the hospital are grossly inadequate and not commensurate with the number of major operations claimed to have been performed as under:-

Date	No. of blood units used
15.03.2008	Nil
20.03.2008	Nil
25.03.2008	Nil
30.03.2008	01
05.05.2008	Nil
09.05.2008	Nil

5. There is no lecture theatre in the hospital.
6. RHTC Butiboni is taken on lease which is not as per norms.
7. Other deficiencies as pointed out in the inspection report.

In view of the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for increase of seats in MBBS course from 100 to 150 at N.K.P. Salve Medical Sciences & Lata Mangeshkar Hospital, Nagpur u/s 10A of the I.M.C. Act, 1956.

82. National Institute of Medical Sciences, Jaipur – Renewal of permission for admission of 5th batch of students for the academic session 2008-09.

Read: The Council Inspectors report (29th & 30th April 2008, 20th May 2008 and 10.06.2008) for renewal of permission for admission of 5th batch of students for the academic session 2008-2009 at National Institute of Medical Sciences, Jaipur.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council while considering the inspection report of the institute at its meeting held on 12.5.2008 had decided as under:-

“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 (29th & 30th April, 2008) and decided to recommend to the Central Govt. to renew the permission for admission of 5th batch of 100 (Hundred) MBBS students at National Institute of Medical Sciences, Jaipur for the academic session 2008-2009.”

Thereafter, the complaints were received in the Council Office wherein it was decided to verify the teaching faculty, the communication to the Central Govt. was withheld and another inspection to verify teaching faculty and clinical material available at the institute by way of inspection which was conducted by the Council Inspectors on 20.5.2008 & 10.06.2008.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the Council Inspectors report (29th & 30th April 2008, 20th May 2008 and 10.06.2008) and noted the following:-

1. (a) The shortage of teaching faculty is 57.02 % (69 /121) as under:-
- i) Professor-04 (Anatomy-1, Microbiology-1, Paediatrics-1, Radio-Diagnosis1)
 - ii) Associate Professor15(Anatomy -2,Physiology-2, Biochemistry-1, Pathology-1, Microbiology –1, Comm.Medicine-1, Medicine-2, Pediatrics-1, TB-1, Derma-1, Orthopaedics-1, Radio-Diagnosis1)
 - iii) Assistant Professor-21(Physiology-2, Pharmacology-2, Pathology-3, Com-Medicine-3, Medicine-1, TB-1, Psychiatry-1, Surgery-1, Anasthesia-2, Radio-Diagn.1, Bio-Physics-1, Pharm-Chemist-1 ,Epidemio-1, Stat-1)

- iv)

Tutor 29

(Anatomy-1,Physiology-3, Biochemistry-1, Pharmacology-3, Pathology-6, Microbiology-2, Forensic Medicine-2, Com.Medicine-4, Anaesthesio-5, Radio-Diagn.2,)
- (b)

The shortage of Residents is : 71 / 76 (93.42 %)
- Sr. Residents- 18

(Medicine-4,Paediatrics-2,TB-1,Dermatology-1,Psychiatry-1,Surgery-4,Orthopaedics-2, ENT-1,Ophthalmology-1,OBG-1,)
- Jr. Residents -53

(Medicine-11,Paediatrics-6, TB-2,Dermatology-3, Psychiatry-3,Surgery-11,Orthopaedics-6, ENT-2,Ophthalmology-3,OBG-6,)

2. Clinical Material is grossly inadequate as under:-

	Day of Inspection 10-6-2008
O.P.D. attendance	244
Casualty attendance	03
Number of admissions / discharge	02 / 00
Bed occupancy%	03
Operative work	
Number of normal deliveries	00
Number of caesarian Sections	01
<u>Radiological Investigations</u>	
X-ray	02
Ultrasonography	06
Special Investigations	01
C.T. Scan	00
<u>Laboratory Investigations</u>	
Biochemistry	02
Microbiology	04
Serology	00
Parasitology	00
Haematology	00
Histopathology	01
Cytopathology	01
Others	-

(b) Detailed Distribution of Beds was found to be as under:-

General Medicine				General Surgery		
Ward No.	Beds	Occupancy Inspection day		Ward No.	Beds	Occupancy Inspection day
MMW	72	00		Male	86	03
FMW	48	00		Female	34	03
Pediatrics				Orthopedics		
Ward No.	Beds	Occupancy Inspection day		Ward No.	Beds	Occupancy Inspection day
Two	60	01		Male	40	04
				Female	20	01
TB & Chest				Ophthalmology		
Ward No.	Beds	Occupancy Inspection day		Ward No.	Beds	Occupancy Inspection day
Male	10	00		Male	12	00
Female	10	00		Female	08	00
Skin &				ENT		

VD						
Ward No.	Beds	Occupancy Inspection day		Ward No.	Beds	Occupancy Inspection day
Male	05	00		Male	11	00
Female	05	00		Female	09	00
Psychiatry				Obstetrics & Gyanecology		
Ward No.	Beds	Occupancy Inspection day		Ward No.	Beds	Occupancy Inspection day
Male	05	00		Gynec	20	01
Female	05	00		Obst	40	02
Casualty & Intensive Care						
Ward No.	Beds	Occupancy Inspection day		Ward No.	Beds	Occupancy Inspection day
ICCU	04	02		Casualty	20	03
ICU(Med)	06	02		NICU	04	02
ICU(Surg)	06	02		PICU	05	00
Burns	02	00		Obstetric	-	-

Observation: Bed Occupancy on the day of Inspection is 03 % (15/500)

3. Other deficiencies pointed out in the inspection report.

In view of above and Govt. of India letter dt. 15/3/2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council decided to recommend to Central Govt. not to renew the permission for admission of 5th batch of students for the academic session 2008-2009 at National Institute of Medical Sciences, Jaipur.

83. Establishment of a new medical college at Jalgaon, Maharashtra by Godavari Foundation, Jalgaon, Maharashtra.

Read: The compliance verification inspection report (10.06.2008) along with Council Inspectors report (29th & 30th April 2008) and the State Government letter dated 26.05.2008 for grant of Letter of Permission for establishment of new medical college at Jalgaon, Maharashtra by Godavari Foundation, Jalgaon, Maharashtra u/s 10(A) of the IMC Act, 1956.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the compliance verification inspection report (10.06.2008) along with Council Inspectors report (29th & 30th April 2008) and the State Government letter dated 26.05.2008 and noted the following:-

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

(a) The shortage of teaching faculty is 27.27% (i.e. 15 out of 55) as under:-

Professor	01	(Biochemistry 1)
Asso. Prof.	04	(Physiology-2, Pharmacology-1 & Anaesthesia-1)
Asst. Prof	04	(Anatomy-2, Community Medicine-1 & General Medicine-1)
Tutor	06	(Anatomy-1, Physiology-2, Pathology-1, Microbiology-1 & Community Medicine-1)

(b) The shortage of Residents is 54.7%(i.e. 23 out of 42) as under :-

Sr. Resident	13	Gen.Med.-3, Gen-Surgery-4, Orthopaedics-1,ENT-1, OBGY-2, Radiodignosis-2
Jr. Resident	10	Gen.Med-7, Paediatrics-2, Gen.Surgery-1

2. Clinical material is grossly inadequate as under:-

	Daily Average		Day of Inspection	
O.P.D. attendance	250-300		400	
Casualty attendance	01		01	
Bed occupancy%	No records		20	
Operative work	2-3		05	
Number of major surgical operations	03		04	
Number of minor surgical operations	03 in one month		01	
Number of normal deliveries	--		--	
Number of caesarian Sections				
<u>Radiological Investigations</u>	O.P.	I.P.	O.P.	I.P.
X-ray	10	02	18	02
Ultrasonography	06	01	07	04
Special Investigations	--	--	--	--
C.T. Scan	NA			
<u>Laboratory Investigations</u>				
Biochemistry	20	25	15	20
Microbiology(HIV Test)	10	05	20	10
Serology	--	--	--	--
Parasitology	--	--	--	--
Haematology	100	50	70	50
Histopathology	--	--	--	--
Cytopathology	--	--	--	--
Others				

- More than 50% of the IP patients did not require any treatment.
- More than 50% of the OP patients did not require hospitalization.
- Admitted patients in the wards had vague symptoms like vomiting, GI upset, backache and headache.
- Cataract patients in Eye ward were admitted while there is no provision for any eye surgery in the hospital as the eye OT is non-functional.
- Clinical material is inadequate in terms of OPD attendance, Casualty attendance and bed occupancy.
- There is no record of patients admitted/discharged in the hospital. Hence the daily average of bed occupancy could not be ascertained.
- The operative work in terms of major surgeries, minor surgeries, normal deliveries and LSCS was found to be grossly inadequate.
- There is no record of deliveries conducted in the hospital. (3 in one month) Birth Certificates have not been issued for the 3 deliveries conducted in last one month. Prior to 10th May 2008, the Labour room was not functional.
- The radiological investigations conducted in the hospital are grossly inadequate X-ray reports are made available with no signatures of the consultant.
- Only 3 normal deliveries have been performed since 17/5/08 till date. No record of birth registration was available.
- The laboratory investigations conducted in the hospital are also grossly inadequate. There is no facility for serology, parasitology, histopathology and cytopathology investigations. Central lab reports did not have the dates/IP No./OP Nos. of the patients.
- The microbiology tests conducted in the hospital mainly comprise of HIV and HbsAG testing
- The radiological investigations do not co-ordinate with the symptoms/diagnosis of the patients.
- In Orthopedics OPD, patients were advised for POP without having any facilities for the same. No radiological examination was advised for patients who were provisionally diagnosed as cases of fractures.

3. There were no register of vaccination available in the Paediatrics OPD. No vaccine/Thermometer available in the refrigerator.
4. Commotion was observed in the corridor and in the wards as it appeared that a big crowd of non-genuine patients was brought in the hospital in hired buses.
5. A Fake female doctor was spotted in the Paediatrics OPD. When asked for identification, she disappeared from the hospital. Her identity could not be ascertained as the Chairman kept on telling that she will appear for head count and has gone for bringing her I-Card from home.
6. OPD registers are available in the respective OPD's with no recording of provisional diagnosis. In Orthopaedics OPD, all patients were prescribed POP without getting appropriate radiological investigation even though they were diagnosed as fracture.
7. Record of admissions and discharge is kept partially.
8. Casualty had no water supply, no doctors/ nurses duty roster, no functional minor OT. Only 5 patients attended the casualty during the last one month. There were no patients in the casualty on the day of inspection. Plaster room in the casualty was non functional with no provision of water supply. Casualty OT is non-functional.
9. There is no record of bed occupancy.
10. Record of all major and minor surgeries are maintained in OT's. No anesthesia registers are maintained. The Orthopaedics OT and Ophthalmology OT are non functional. Most of the operations in general surgery are being done in LA (incision hernia, hydrocele, inguinal hernia).
11. Radiology department is functional but only 8 to 10 X-rays are being done daily (only OPD patients). Patients were being x-rayed for spine without prior preparation. There was no registration number of the patient on any x-ray plate.
12. Separate Clinical Central Laboratory is present. Separate collection centre area is provided. There is no provision for histopathology and cytopathology investigations. In microbiology section, most of the patients are being screened for HIV without consent/pretest counselling. The entries in the registers for clinical investigations are not being maintained properly (no OP/IP number, no date of investigation). Deficiency partially rectified.
13. No facilities are available for Microbiology investigations.
14. Ward 1 is a common ward of 80 beds for OBG (50) and Paediatric (30).
Ward II (Female Ward) with 74 beds has General Medicine (24), Gen Surgery (30), ENT(5), Ophthalmology (5) and Orthopaedics (10) beds, with semi wooden partition for individual departments. In these wards, 50% of the beds were occupied by children and even 10 adult males, who were apparently normal.
Ward III (Male Ward) has 80 beds for surgery(60) and orthopaedics(20) beds.
Ward IV has 66 beds for General Medicine(56), Ophthalmology(5) and ENT(5) male patients.
Distribution of beds is not as per MCI norms. The records of the patients are not being maintained properly in the wards. No operation notes/Anaesthesia notes are available in the surgery ward.
15. There are no records of admissions/ discharge in the admission counter as well as in so called Medical Records Department. Registration and Medical Record Section is not computerized and is not functional. Indoor registration counter is not available. There is a medical record department with no qualified staff. Follow up service is not available.
16. In OPD, each speciality is provided only 1 room for examination of patients and accommodation for the doctors. There is a common injection room for male and female patients, plaster room (non functional). There is no ECG room, no plaster cutting room, no family welfare clinic and minor OT is non-functional.
17. In Wards, there is no procedure room, side lab, no nursing station, no pantry in any ward. No clinical demonstration areas have been provided in the wards. There is no seminar hall in the departments.
18. There is a Central Clinical laboratory. There is no facility for Microbiology, parasitology Histopathology and Cytopathology investigations.
19. In ICU, Central Oxygen, Central Suction/ Oxygen cylinder and suction apparatus are available. ICU seems to be not in use.
20. Pharmacy is available with no stock register.
21. There is no instrument washing area and no trained staff available in the CSSD.
22. No intercom is provided at present in the hospital or the college.
23. Central laundry is not available.

- 24. Kitchen is available. There is no provision for special diet. Services of dietician are not available. Deficiency partially rectified.
- 25. No canteen is available.
- 26. The paramedical staff is grossly inadequate

Lab Tech –09
Lab Asst.-Nil
Lab attendant-Nil

- 27. Nursing staff is grossly inadequate as under
Nursing Suptd.-1
DNS – Nil
Matron-1
ANS-1
Staff Nurses-17
Wards were being managed by untrained nurses.

- 28. Other deficiencies/remarks in the main report.

In view of above and the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon’ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the Regulations and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Jalgaon, Maharashtra by Godavari Foundation, Jalgaon, Maharashtra Trust u/s 10(A) of the IMC Act, 1956.

84. Establishment of new medical college at Kadapa, Andhra Pradesh by Mohammadiya Educational Society, Kadapa, Andhra Pradesh – Permission of the Central Govt. – Regarding.

Read: The Central Govt. letter dated 16.05.2008 & 09.06.2008 alongwith letter dated 14.05.2008 from the Mohammadiya Educational Society with regard to consideration of the proposal for establishment of new medical college at Kadapa by Mohammadiya Educational Society, Kadapa, A.P. and conduct the inspection for the academic year 2008-09.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and the Executive Committee of the Council considered the Central Govt. letter dated 16.05.2008 and 09.06.2008 alongwith letter dated 14.05.2008 from Mohammadiya Educational Society and observed that at its earlier meeting held on 12.05.2008 it was decided as under:-

“The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council considered the Central Govt. letter dated 02.05.2008 forwarding therewith a copy of revalidated essentiality certificate issued by the Govt. of A.P. on 26-4-2008 and consent of affiliation dated 30-4-2008 issued by Dr. NTR University of Health Sciences, Vijayawada and requested to conduct the inspection of the proposed medical college in the first fortnight of June, 2008.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council further observed that the schedule for receipt of applications for establishment of new medical colleges as prescribed under the Establishment of Medical College Regulations, 1999 as under:-

SCHEDULE FOR RECEIPT OF APPLICATIONS FOR ESTABLISHMENT OF NEW MEDICAL COLLEGES AND PROCESSING OF THE APPLICATIONS BY THE CENTRAL GOVERNMENT AND THE MEDICAL COUNCIL OF INDIA

Stage of Processing	Last date
1. Receipt of applications by the Central Govt.	From 1st August to 31st August (both days inclusive) of any year

- | | |
|--|----------------------------|
| 2. Receipt of applications by the MCI from Central Govt. | 30 th September |
| 3. Recommendations of Medical Council of India to Central Government for issue of Letter of Intent | 31st December |
| 4. Issue of Letter of Intent by the Central Government | 31st January |
| 5. Receipt of reply from the applicant by the Central Government requesting for Letter of Permission | 28th February |
| 6. Receipt of Letter from Central Government by the Medical Council of India for consideration for issue of Letter of Permission | 15th March |
| 7. Recommendations of Medical Council of India to Central Government for issue of Letter of Permission | 15th June |
| 8. Issue of Letter of Permission by the Central Government | 15th July |
-

It was further observed that the Hon'ble Supreme Court by its order dated 12.01.2005 in Writ Petition [c] No. 306/2004 – Mridul Dhar (Minor) & Anr. Vs. UOI & Ors. – (2005) 2 SCC 65, while emphasizing the need for strict enforcement of the time schedule had directed as under:-

“.....35. We issue the following directions:-

1-13.....

- 14. Time schedule for establishment of new college or to increase intake in existing college, shall be adhered to strictly by all concerned.*
- 15. Time schedule provided in Regulations shall be strictly adhered to by all concerned failing which defaulting party would be liable to be personally proceeded with.....”*

In accordance with the statutory time schedule for grant of permission in view of the directions of the Hon'ble Supreme Court, the strict adherence of each of the following stages is an absolute imperative:-

- “a. All new applications u/s 10A are necessarily required to be submitted with the Central Govt. between 1st of August to 31st of August of any year. This Hon'ble court has already held in the case of UOI Vs. All India Children Care and Educational Development Society – (2002) 3 SCC 649 (para-5 at pg.652, that it is only such applications which are complete in all respects as per the qualifying criteria laid down in the statutory regulations, deserve to be treated as applications u/s 10A of the Indian Medical Council Act,1956 and the Dentists Act, 1948 which then become eligible for consideration u/s 10A of the respective enactments.*
- b. The 2nd stage imperative is that the complete applications which are received by the Central Govt. between the 1st of August to 31st of August are then required to be forwarded to the MCI positively before the 30th of September of that year in which the fresh applications are submitted to the Central Govt. The Central Govt. is, therefore, obliged to forward the complete applications u/s 10A of the Act to the Council by 30th of September and not thereafter.”*

It was further observed that with reference to the above-mentioned principles of law laid down by the Hon'ble Supreme Court in Mridul Dhar's case, inter-alia, fixing the time schedule for admission process, opening of a new medical college to that of issuance of Letter of Permission on the recommendations of the Council, by the Central Govt. etc., the Govt. of India had issued a communication dated 15.03.2005 addressed to MCI making it absolutely clear that all the recommendations of the MCI with regard to permission/ renewal of medical colleges should be sent to the Central Govt. latest by 15.6.2005 and the Central Govt. will not accept any recommendations after 15.6.2005 and whereafter it shall be the sole responsibility of the MCI.

The relevant portion of the said letter dated 15.03.2005 of the Central Govt. addressed to the MCI, is reproduced below :-

“.....

I am directed to invite your attention to the directions of the Hon'ble Supreme Court dated 12.1.2005 in the above mentioned case with particular reference to the following observations made therein :-

‘.....Having regard to the professional courses into consideration, it deserves to be emphasized that all concerned including Governments, State and Central both, MCI/DCI, colleges, new or old, students, Boards, universities, examining authorities etc. are required to strictly adhere to time schedule wherever provided for; there should not be mid-stream admission; admission should not be in excess of sanctioned intake capacity or in excess of quota of any one, whether State or Management. The carrying forward of any unfilled seats of one academic year to next academic year is also not permissible.....’

You are requested to kindly bring the above directions of the Hon'ble Court to the notice of all the medical colleges/institutions and the authorities concerned in the country for strict adherence to the Time schedule prescribed in the Regulations of the Council for admission of students for the Undergraduate courses, and also the Time schedule prescribed for admission in the Postgraduate/Super Specialty courses indicated in this Ministry's letter No.V-11025/1/2003-ME(P.I) dated 14th May, 2003.

The Hon'ble Court has also directed that the Time schedule prescribed in the Regulations for Establishment of new Medical colleges, increase of intake capacity and for Opening of new or higher courses of study has also to be strictly adhered to. Similarly, the process of annual renewal of permissions have also to be completed in accordance with the Time schedule so that the Time schedule prescribed for admission of students is not disrupted. Therefore, as the Council is required to forward its recommendation in this regard to the Ministry and thereafter the Government is required to issue necessary permission/renewal of permission within the time prescribed for the same, the Council is requested to advise all the concerned colleges/institutions to get the inspections done well in time.

From the above, it appears that in accordance with the Regulations in force and various pronouncements of the Hon'ble Supreme Court, the strict adherence to each of the following stages is an absolute imperative:-

- a. All new applications u/s 10A are necessarily required to be submitted with the Central Govt. between 1st of August to 31st of August of any year. This Hon'ble Court has already held in the case of UOI Vs. All India Children Care and Educational Development Society- (2002) 3 SCC 649 (para-5 at pg.652, that it is only such applications which are complete in all respects as per the qualifying criteria laid down in the statutory regulations, deserve to be treated as applications u/s 10A of the Indian Medical Council Act, 1956 and the Dentists Act, 1948 which then become eligible for consideration u/s 10A of the respective enactments.*
- b. The 2nd stage imperative is that the complete applications which are received by the Central Govt. between the 1st of August to 31st of August are then required to be forwarded to the MCI positively before the 30th of September of that year in which the fresh applications are submitted to the Central Govt. The Central Govt. is, therefore, obliged to forward the complete applications u/s 10A of the Act to the Council by 30th of September and not thereafter.*
 - (i) Upon receipt of the application from the Central Govt. on or before 30th of September, the Council is required to undertake the exercise of evaluate those applications and conducting inspections for the purpose of consideration of the case for recommending to the Govt. of India, for grant of Letter of Intent (LOI). This exercise has to be completed by the Council on or before 31st of December and this time stage is also an absolute imperative.*
 - (ii) Thereafter, the Govt. of India is required to issue Letter of Intent (LOI) on the basis of the recommendations of the Council on or before 31st of January. This time stage is also required to be strictly adhered to and is an imperative.*
 - (iii) The college then becomes due for consideration for recommendations by the Council for grant of Letter of Permission (LOP) on fulfillment of minimum infrastructural, teaching and other*

facilities. It is only upon the grant of Letter of Permission that the college becomes entitled to undertake the admission process and admit students.

The proposal for establishment of new medical college by Kadapa, Andhra Pradesh by Mohammadiya Educational Society, Kadapa, Andhra Pradesh was received in the office of the Council on 03.10.2006 forwarded by the Central Govt. vide letter dated 30.09.2006 which was not an application complete in all respects in as much as neither Essentiality Certificate required as per Qualifying Criteria No. 2 (3) nor Consent of Affiliation required as per Qualifying Criteria No. 2(4) of the Establishment of Medical College Regulations, 1999 were available. As per the facts admitted on record, the Essentiality Certificate has been issued by the State Govt. only on 26.04.2008 and the consent of affiliation has been issued by Dr. N.T.R. University of Health Sciences, Vijayawada only on 30.04.2008. Thus, admittedly on 30th September, 2007, the application of the institute was not complete as neither the Essentiality Certificate from the State Govt. of Andhra Pradesh nor the consent of affiliation from Dr. N.T.R. University of Health Sciences to which the proposed college is to be affiliated were in existence and thus the application did not fulfil two vital Qualifying Criteria of the Establishment of Medical College Regulations, 1999 pertaining to the Essentiality Certificate and Consent of Affiliation.

In view of above and after due deliberation and consideration of the Regulations in force and the orders of the Hon'ble Supreme Court in various judgments, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided that it would be neither possible nor permissible for any authority to process any application, which, due to any reason is in violation of the time schedule prescribed in the Regulations. As the application for establishment of new medical college at Kadapa, Andhra Pradesh by Mohammadiya Education Society, Kadapa, Andhra Pradesh, admittedly, had not been received till 30th September, 2007 being the last date for receipt of the applications in the Council Office for consideration for the academic session 2008-09 and accordingly it was decided to reiterate its earlier decision dated 12.05.2008 to return the application to the Central Government recommending disapproval of the scheme for establishment of new medical college at Kadapa, Andhra Pradesh by Mohammadiya Education Society, Kadapa, Andhra Pradesh u/s 10A of the I.M.C. Act, 1956. It was further decided that the Central Government, may be informed accordingly."

In view of above and after due deliberation and consideration of the Regulations in force and the orders of the Hon'ble Supreme Court in various judgments, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate that it would be neither possible nor permissible for any authority to process any application, which, due to any reason is in violation of the time schedule prescribed in the Regulations. As the application for establishment of new medical college at Kadapa, Andhra Pradesh by Mohammadiya Educational Society, Kadapa, admittedly, had not been received till 30th September, 2007 being the last date for receipt of the applications in the Council Office for consideration for the academic session 2008-09 and accordingly it was decided to reiterate its earlier decision dated 12.05.2008 to return the application to the Central Government recommending disapproval of the scheme for establishment of new medical college at Kadapa, Andhra Pradesh by Mohammadiya Educational Society, Kadapa, Andhra Pradesh u/s 10A of the I.M.C. Act, 1956. It was further decided that the Central Government, may be informed accordingly.

85. Establishment of new medical college at Noida, Uttar Pradesh by Sharda Education Trust u/s 10A of the IMC Act, 1956.

Read: The Central Govt. letters dated 6th June, 2008 & 10.06.2008 alongwith letter dated 28.05.2008 from the Sharda Education Trust with regard to consideration of the proposal for establishment of new medical college at Sharda Education Trust and conduct the inspection for the academic year 2008-09.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and the Executive Committee of the Council considered the Central Govt. letter dated 6th June, 2008 & 10.06.2008 alongwith letter dated 28.05.2008 from the Sharda Education Trust and observed that at its earlier meeting held on 12.05.2008 it was decided as under:-

"The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that at its meeting held on 13th & 14th June, 2007 while considering the inspection report of the inspection carried out for recommending grant of

Letter of Permission for establishment of a new medical college at Noida, U.P by Sharda Education Trust, Agra, Uttar Pradesh, it was decided as under:-

“
7. The distribution of teaching beds is inadequate as under:-

Speciality	Required Beds/Units	Present Beds/Units	Deficiency (if any)
General Medicine	80	60	20
Surgery & Allied Specialities			
General Surgery	90	70	20
Ophthalmology	10	06	04
Obstetrics & Gynaecology			
Obstetrics & ANC	30	30	04

Thus, there is total deficiency of 48 beds.

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 observed that the applicant has failed to fulfil the mandatory and statutory precondition at Sr. No. 2(5) of the Qualifying Criteria of owning & managing of a functional hospital of not less than 300 beds, laid down in the Establishment of Medical College Regulations, 1999.

In view of the Govt. of India letter dated 15.03.2005 issued after the directions of the Hon’ble Supreme Court in case of Mridul Dhar Vs. UOI & Ors. directing the Council to strictly adhere to the time schedule prescribed under the regulations, and as per the Schedule prescribed in the Establishment of Medical College Regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June, 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 application to the Central Govt. recommending disapproval of the scheme for establishment of new medical college at Noida, Uttar Pradesh by Sharda Education Trust 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 Uttar Pradesh requesting to intimate as to how the Essentiality Certificate vide letter dated 21.03.2006 certifying that the applicant owned and managed a functional hospital of 300 beds having adequate clinical material has been given, when on inspection it has been found that only 256 beds are available.”

It was further observed that in view of the above decision the application (in original) for establishment of new medical college at Noida was returned to the Central Government vide Council letter dated 15.6.2007.

Thereafter, the Central Government while forwarding the letter from the Applicant-Trust vide letter dated 8th May, 2008 had stated as under:-

“I am directed to enclose herewith a copy of letter dated 29.4.2008 received from the Chairman, Sharda Educational Trust, Noida, Uttar Pradesh on the subject noted above alongwith the letter No. 71-3-08-N-19/05 dated 21.4.2008 issued by the State Govt. of Uttar Pradesh certifying that the applicant has 300 beds in different wards of hospital.

Medical Council of India is requested to conduct inspection of the proposed medical college at Noida, Uttar Pradesh by Sharda Educational Trust, Noida for the academic year 2008-09 and the recommendations of the Council on the same may please be submitted to this Ministry as per the time schedule prescribed in MCI Regulations, 1999.”

Perusal of the letter dated 21st April, 2008 reveals that the report of the team of the U.P. Government who visited the hospital on 16.2.2008 stated as under:-

“.....□□□□□□ 16.02.2008 □□ □□□□ □□□□□□ □□□□□□ □□ □□ □□□□□□ □□□□ □□□□□□ □□ □□□□ □□□□□ □□□□ □□ □□□□ (□□□□□□□□ □□□□□□) □□ □□□□□□ ENT-M/F □□□ 06, ENT-Male □□□ 01, GM-M/F □□□ 82, GM-Male □□□ 02, GS-M/F □□□ 56, GS-Male □□□ 05, Gyn □□□ 03, Obs □□□ 01, Obs/Gyn □□□ 48, Oph-M/F □□□ 08, Ortho-M/F □□□ 29, Pae □□□ 28, □□□□ □□□□□ □□□□ □□ □□□ 269 □□□□□ □□□□□□ □□□ □□ 42 □□□□ □□□□□□ 14.02.2008 □□, 50 □□□□ □□□□□□

[illegible]

It was thus observed that out of 269 patients found in the hospital on 16.2.2008, as many as 78- i.e. nearly 30% - were admitted only on the day of inspection and 92 patients i.e. nearly 35% were admitted just one or two days prior to the date of inspection. Many patients who were admitted suffered from common ailments like cough, fever etc. who are not ordinarily required in the hospital and are of no teaching and clinical significance.

It was observed that as per the statutory requirements under the MCI Regulations framed under Section 33 of the Indian Medical Council Act, 1956 with the prior approval of the Ministry of Health, Govt. of India, State Governments are obliged to issue essentiality certificate to the applicants seeking the establishment of new medical colleges under Section 10A of the Act. Such an essentiality certificate can be issued only after proper verification and instructions of the concerned State Government authorities that the applicant owns and manages 300 bedded hospitals with necessary infrastructural facilities capable of being developed into a teaching institution in the campus of the proposed medical college at the proposed site and adequate clinical material as per the Medical Council of India norms is available. Needless to state that such an essentiality certificate is then subject to verification by the inspection team of the Medical Council of India under the provisions of the Indian Medical Council Act, 1956.

Accordingly, the communication dated 4.7.2007 was addressed by the MCI to the State Government requesting to intimate the basis on which the essentiality certificate dated 21.3.2006 had been issued by the State authorities specifying that the applicant had owned and managed a functional hospital of 300 beds having adequate clinical material. While reiterating that a properly verified and assessed essentiality certificate by the concerned State authorities facilitate the discharge of responsibility by the Medical Council, it is stated that the above-mentioned communication dated 21.4.2008 does not inform the MCI, the basis on which the certification incorporated in the essentiality certificate dated 21.3.2006, had been issued by the State Government to Sharda Education Trust, as mentioned above.

It was observed that the time schedule for different stages prescribed under Establishment of Medical College Regulations, 1999 is as under:-

SCHEDULE FOR RECEIPT OF APPLICATIONS FOR ESTABLISHMENT OF NEW MEDICAL COLLEGES AND PROCESSING OF THE APPLICATIONS BY THE CENTRAL GOVERNMENT AND THE MEDICAL COUNCIL OF INDIA

	<i>Stage of Processing</i>	<i>Last date</i>
1.	<i>Receipt of applications by the Central Govt.</i>	<i>From 1st August to 31st August (both days inclusive) of any year</i>
2.	<i>Receipt of applications by the MCI from Central Govt.</i>	<i>30th September</i>
3.	<i>Recommendations of Medical Council of India to Central Government for issue of Letter of Intent</i>	<i>31st December</i>
4.	<i>Issue of Letter of Intent by the Central Government</i>	<i>31st January</i>
5.	<i>Receipt of reply from the applicant by the Central Government requesting for Letter of Permission</i>	<i>28th February</i>
6.	<i>Receipt of Letter from Central Government by the Medical Council of India for consideration for issue of Letter of Permission</i>	<i>15th March</i>
7.	<i>Recommendations of Medical Council of India to Central Government for issue of Letter of Permission.</i>	<i>15th June</i>
8.	<i>Issue of Letter of Permission by the Central Government.</i>	<i>15th July</i>
Note: (1)	<i>The information given by the applicant in Part-I of the application for setting up a medical college that is information regarding organization, basic infrastructural facilities, managerial and financial capabilities of the applicant shall be scrutinized by the Medical Council of India through an inspection and thereafter the Council may recommend issue of Letter of intent by the Central Government.</i>	
(2)	<i>Renewal of permission shall not be granted to a medical college if the above schedule for opening a medical college is not adhered to and admissions shall not be made without prior approval of the Central Government.....</i>	

It was further observed that by its judgment dated 12.1.2005 passed by the Hon'ble Supreme Court in WP (C) No. 306/2004-Mridul Dhar (Minor) & Anr. Vs. UOI & Ors (2005) 2 SCC 65 for bringing the entire admission process in all medical courses in accordance with the time schedule, had directed as under:-

"..... 35. Having regard to the aforesaid, we issue the following directions : -

1-13.

14. Time schedule for establishment of new college or to increase intake in existing college, shall be adhered to strictly by all concerned.

15. Time schedule provided in Regulations shall be strictly adhered to by all concerned failing which defaulting party would be liable to be personally proceeded with.

In accordance with the statutory time schedule for grant of permission in view of the directions of the Hon'ble Supreme Court, the strict adherence of each of the following stages is an absolute imperative:-

"a. All new applications u/s 10A are necessarily required to be submitted with the Central Govt. between 1st of August to 31st of August of any year. This Hon'ble court has already held in the case of UOI Vs. All India Children Care and Educational Development Society – (2002) 3 SCC 649 (para-5 at pg.652, that it is only such applications which are complete in all respects as per the qualifying criteria laid down in the statutory regulations, deserve to be treated as applications u/s 10A of the Indian Medical Council Act, 1956 and the Dentists Act, 1948 which then become eligible for consideration u/s 10A of the respective enactments.

b. The 2nd stage imperative is that the complete applications which are received by the Central Govt. between the 1st of August to 31st of August are then required to be forwarded to the MCI positively before the 30th of September of that year in which the fresh applications are submitted to the Central Govt. The Central Govt. is, therefore, obliged to forward the complete applications u/s 10A of the Act to the Council by 30th of September and not thereafter."

It was further observed that with reference to the above-mentioned principles of law laid down by the Hon'ble Supreme Court in Mridul Dhar's case, inter-alia, fixing the time schedule for admission process, opening of a new medical college to that of issuance of Letter of Permission on the recommendations of the Council, by the Central Govt. etc., the Govt. of India had issued a communication dated 15.03.2005 addressed to MCI making it absolutely clear that all the recommendations of the MCI with regard to permission/ renewal of medical colleges should be sent to the Central Govt. latest by 15.6.2005 and the Central Govt. will not accept any recommendations after 15.6.2005 and whereafter it shall be the sole responsibility of the MCI.

The relevant portion of the said letter dated 15.03.2005 of the Central Govt. addressed to the MCI, is reproduced below : -

".....

I am directed to invite your attention to the directions of the Hon'ble Supreme Court dated 12.1.2005 in the above mentioned case with particular reference to the following observations made therein :-

'.....Having regard to the professional courses into consideration, it deserves to be emphasized that all concerned including Governments, State and Central both, MCI/DCI, colleges, new or old, students, Boards, universities, examining authorities etc. are required to strictly adhere to time schedule wherever provided for; there should not be mid-stream admission; admission should not be in excess of sanctioned intake capacity or in excess of quota of any one, whether State or Management. The carrying forward of any unfilled seats of one academic year to next academic year is also not permissible.....'

You are requested to kindly bring the above directions of the Hon'ble Court to the notice of all the medical colleges/institutions and the authorities concerned in the country for strict adherence to the Time schedule prescribed in the Regulations of the Council for admission of students for the Undergraduate courses, and also the Time schedule prescribed for admission

in the Postgraduate/Super Specialty courses indicated in this Ministry's letter No.V-11025/1/2003-ME(P.I) dated 14th May, 2003.

The Hon'ble Court has also directed that the Time schedule prescribed in the Regulations for Establishment of new Medical colleges, increase of intake capacity and for Opening of new or higher courses of study has also to be strictly adhered to. Similarly, the process of annual renewal of permissions have also to be completed in accordance with the Time schedule so that the Time schedule prescribed for admission of students is not disrupted. Therefore, as the Council is required to forward its recommendation in this regard to the Ministry and thereafter the Government is required to issue necessary permission/renewal of permission within the time prescribed for the same, the Council is requested to advise all the concerned colleges/institutions to get the inspections done well in time.

From the above, it appears that in accordance with the Regulations in force and various pronouncements of the Hon'ble Supreme Court, the strict adherence to each of the following stages is an absolute imperative:-

- c. All new applications u/s 10A are necessarily required to be submitted with the Central Govt. between 1st of August to 31st of August of any year. This Hon'ble Court has already held in the case of UOI Vs. All India Children Care and Educational Development Society– (2002) 3 SCC 649 (para-5 at pg.652, that it is only such applications which are complete in all respects as per the qualifying criteria laid down in the statutory regulations, deserve to be treated as applications u/s 10A of the Indian Medical Council Act, 1956 and the Dentists Act, 1948 which then become eligible for consideration u/s 10A of the respective enactments.*
- d. The 2nd stage imperative is that the complete applications which are received by the Central Govt. between the 1st of August to 31st of August are then required to be forwarded to the MCI positively before the 30th of September of that year in which the fresh applications are submitted to the Central Govt. The Central Govt. is, therefore, obliged to forward the complete applications u/s 10A of the Act to the Council by 30th of September and not thereafter.*
 - (i) Upon receipt of the application from the Central Govt. on or before 30th of September, the Council is required to undertake the exercise of evaluate those applications and conducting inspections for the purpose of consideration of the case for recommending to the Govt. of India, for grant of Letter of Intent (LOI). This exercise has to be completed by the Council on or before 31st of December and this time stage is also an absolute imperative.*
 - (ii) Thereafter, the Govt. of India is required to issue Letter of Intent (LOI) on the basis of the recommendations of the Council on or before 31st of January. This time stage is also required to be strictly adhered to and is an imperative.*
 - (iii) The college then becomes due for consideration for recommendations by the Council for grant of Letter of Permission (LOP) on fulfillment of minimum infrastructural, teaching and other facilities. It is only upon the grant of Letter of Permission that the college becomes entitled to undertake the admission process and admit students.*

In view of above and after due deliberation and consideration of the Regulations in force and the orders of the Hon'ble Supreme Court in various judgments, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided that it would be neither possible nor permissible for any authority to process any application, which, due to any reason is in violation of the time schedule prescribed in the Regulations. As the application for establishment of new medical college at Noida by Sharda Education Trust, admittedly, had not been received till 30th September, 2007 being the last date for receipt of the applications in the Council Office for consideration for the academic session 2008-09 and accordingly it was decided to return the application to the Central Government recommending disapproval of the scheme for establishment of new medical college at Noida, U.P. by Sharda Education Trust, Agra, Uttar Pradesh u/s 10A of the I.M.C. Act, 1956. It was further decided that the Central Government, may be informed accordingly.”

In view of above and after due deliberation and consideration of the Regulations in force and the orders of the Hon'ble Supreme Court in various judgments, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate that it would be neither possible nor permissible for any authority to process any application, which, due to any reason is in violation of the time schedule prescribed in the Regulations. As the application for establishment of new medical college at Noida by

Sharda Education Trust, admittedly, had not been received till 30th September, 2007 being the last date for receipt of the applications in the Council Office for consideration for the academic session 2008-09 and accordingly it was decided to reiterate its earlier decision dated 12.05.2008 to return the application to the Central Government recommending disapproval of the scheme for establishment of new medical college at Noida, U.P. by Sharda Education Trust, Agra, Uttar Pradesh u/s 10A of the I.M.C. Act, 1956. It was further decided that the Central Government, may be informed accordingly.

86. Approval of Govt. Medical College, Latur for the award of MBBS degree granted by Maharashtra University of Health Sciences, Nashik.

Read: The Council Inspectors report (10th & 11th June, 2008) for approval of Govt. Medical College, Latur for the award of MBBS degree granted by Maharashtra University of Health Sciences, Nashik alongwith letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (10th & 11th June, 2008) alongwith letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Government to renew the permission for admission of 6th batch of 100 MBBS students at Govt. Medical College, Latur for the academic session 2008-09.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided to recommend that Govt. Medical College, Latur be approved for the award of MBBS degree granted by Maharashtra University of Health Sciences, Nashik with an annual intake of 100 (Hundred) students per year.

The Committee further decided to place the matter before the General Body of the Council for approval.

87. Establishment of New Medical College at Srikakulam, A.P. by Govt. of Andhra Pradesh.

Read: The Council Inspectors report (06th & 07th June, 2008) for grant of Letter of Permission for establishment of new medical college at Srikakulam, A.P. by Govt. of Andhra Pradesh u/s 10(A) of the IMC Act, 1956 alongwith letter dated 11.06.2008 received from the Principal Secretary to Government of A.P., Health Medical & Family Welfare Department stating that "the work of completion of finishing touch in the building are now in full swing and would be completed by 15th July, 2008 in confirmation with the MCI requirement" and letter dated 15.7.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (06th & 07th June, 2008) alongwith letter dated 11.06.2008 received from the Principal Secretary to Government of A.P., Health Medical & Family Welfare Department stating that "the work of completion of finishing touch in the building are now in full swing and would be completed by 15th July, 2008 in confirmation with the MCI requirement" and letter dated 15.7.2004 from 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 establishment of new medical college at Srikakulam, A.P. by Govt. of Andhra Pradesh with an annual intake of 100 (One Hundred) MBBS students for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

88. Establishment of New Medical College at Adilabad, A.P. by Govt. of Andhra Pradesh.

Read: The Inspection report (03rd & 04th June, 2008) for grant of Letter of Permission for establishment of new medical college at Adilabad, A.P. by Govt. of Andhra Pradesh u/s 10(A) of the IMC Act, 1956 alongwith letter dated 11.06.2008 received from the Principal Secretary to Government of A.P., Health Medical & Family Welfare Department stating that "the work of completion of finishing touch in the building are now in full swing and would be completed by 15th July, 2008 in confirmation with the MCI requirement" and letter dated 15.07.2004 from the Joint Secretary, Govt. of India, Ministry of Health & F.W.

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 (03rd & 04th June, 2008) alongwith letter dated 11.06.2008 received from the Principal Secretary to Government of A.P., Health Medical & Family Welfare Department stating that "the work of completion of finishing touch in the building are now in full swing and would be completed by 15th July, 2008 in confirmation with the MCI requirement" and letter dated 15.7.2004 from 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 establishment of new medical college at Adilabad, A.P. by Govt. of Andhra Pradesh with an annual intake of 100 (One Hundred) MBBS students for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

89. Increase of seats in Ist MBBS course from 100 to 150 at Mahatma Gandhi Medical College & Hospital, Jaipur.

Read: The Council Inspectors report (21st & 22nd May, 2008) for grant of letter of permission for Increase of MBBS seats from 100 to 150 at Mahatma Gandhi Medical College & Hospital, Jaipur.

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 (21st & 22nd May, 2008) and decided to recommend to the Central Govt. to issue Letter of Permission for increase of seats in Ist MBBS course from 100 to 150 at Mahatma Gandhi Medical College & Hospital, Jaipur for the academic session 2008-09 u/s 10A of the I.M.C. Act, 1956.

90. Kesar Sal Medical College and Research Institute, Ahmedabad – Renewal of permission for admission of 5th batch of students for the academic session 2008-2009.

Read: The letter dated 03.06.2008 of Director, Adarsh Foundation, Ahmedabad alongwith photocopies of 90 Declaration Forms received through the Central Govt. vide letter dated 11.06.2008.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted that at its meeting held on 24.8.2007 had decided to recommend to the Central Government not to renew the permission for admission of 4th batch of MBBS students at Kesar Sal Medical College & Research Instt. Ahmedabad for the academic session 2007-08. For the academic year 2008-09 the institute has not submitted the declaration forms inspite of several reminders.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further observed that at its meeting held on 12.5.2008 had decided as under:-

"The members of the Adhoc Committee and the Executive Committee observed that as per Establishment of Medical College Regulations, 1999, it is the responsibility of the applicant institute to apply to the Medical Council of India for renewal of permission six months prior to the expiry of the initial permission. The regulations provide that prior permission on the recommendations of the Medical Council of India after fulfillment of all the conditions matching infrastructure and other teaching facilities is must. The permission so granted for a period of one year and is to be renewed on yearly basis subject to renewal with respect to infrastructure and other teaching facilities as per Section 8(3) of the Regulations.

The members of the Adhoc Committee and the Executive Committee observed that all the medical colleges who were issued Letter of Permission u/s 10A of the I.M.C. Act, 1956 in their earlier years were requested by the Council to submit a letter to the effect that it would be ready and willing for inspection for renewal of permission for the academic year 2008-2009, all such medical colleges were further directed that all the declaration forms of the teaching faculty must be submitted in the Council office in person at least one month prior to the proposed date for inspection to verify the documents, academic qualification, teaching experience etc. and to prevent any manipulation/malpractice. It was observed that such a letter was sent to Kesar Sal Medical College and Research Institute, Ahmedabad on 7th November, 2007 by the

Council office. As no reply was received from the Institute vide reminder dated 16th January, 2008, the institute was once again requested to send its confirmation as regards readiness of inspection.

Vide its letter dated 18th January, 2008, the institute had stated that they are willing to invite inspection of Medical Council of India in the last week of April, 2008 or 1st week of May, 2008. It was further stated that the institute was preparing details of teaching staff and would submit the same to the Council office for inspection/verification. As the institute had indicated its willingness/readiness for inspection of the college for renewal of permission in the last week of April, 2008, it was required to submit the declaration forms of the teaching faculty in the last week of March, 2008 i.e. one month prior to the proposed date of inspection. However, as no declaration forms were submitted by the institute, a reminder was sent by the Council dated 2.4.2008 requesting the Principal to attend the Council office with the declaration forms of all the teachers immediately. As neither the declaration forms were received nor the Principal attended the office of the Council another reminder dated 9.4.2008 was sent to the institute was also sent by fax and E-mail requesting the Principal to attend the office with the declaration forms of all the teachers on 11.4.2008. However, Principal of the Institute did not attend the office of the Council nor sent the declaration forms by the Institute. Reminders dated 22.4.2008 and 28.4.2008 were also sent by the Council requesting the Principal to attend the office of the Council with the declaration forms of the teaching faculty latest by 5.5.2008. Thereafter, vide letter dated 30th April, 2008 the Dean of the Institute had stated that the Medical Director of the Institute would personally come to submit original declaration forms of teaching faculty on 5th May, 2008. However, vide letter dated Nil received by fax in the Council office on 5.5.2008 the Director had stated that due to unavoidable circumstances she was unable to come to MCI office on 5.5.2008 and they would submit the declaration forms very soon.

Further it is observed by the members of the Adhoc Committee and the Executive Committee that neither any explanation has been given by the institute in submitting the declaration forms nor the declaration forms have been submitted in the office of the Council till 12.5.2008 i.e. the date of meeting. Meanwhile, another fax dated Nil was received in the office of the Council on 12.5.2008 from the Director of the Institute stating that due to unavoidable circumstances they are unable to attend the Council office and they would submit the declaration forms very soon.

The members of the Adhoc Committee and of the Executive Committee observed that from the above, it is evident that the Institute has failed to submit the declaration forms of the teaching faculty inspite of repeated reminders and also inspite of promises made by the Institute's Director that they would come to the office and submit the declaration forms. In the absence of declaration forms regarding teaching faculty members required to be furnished in advance, it becomes practically impossible to carry out the inspection properly and effectively. It is, therefore, presumably evident that the institute is neither ready nor willing to pursue its application for renewal of permission for admission of 5th batch of students for the academic session 2008-2009.

The members of the Adhoc Committee and of the Executive Committee were of the opinion that such a prolonged delay in submitting the declaration forms despite repeated opportunities and reminders may give rise to malpractices in the appointment of the teaching faculty and suppression of vital facts like non-availability of the regular teaching faculty in the institute.

In view of above, the members of the Adhoc Committee and of the Executive Committee decided to recommend to the Central Govt. that as Kesal Sal Medical College and Research Institute, Ahmedabad is neither willing nor submitting the Declaration forms of teaching faculty in spite of repeated reminders, not to issue Letter of Permission for renewal of permission for admission of 5th batch of students for the academic session 2008-2009."

The above decision of the Executive Committee was communicated to the Central Government vide letter dated 14.5.2008.

The Central Government vide letter dated 11.6.2008 has forwarded a copy of the letter dated 3.6.2008 received from the Director, Adarsh Foundation alongwith Declaration Forms of the teaching faculty which reads as under:-

“In response to above mentioned subject & reference we inform you that as per the requirements and norms all the declaration forms which were kept ready for the MCI inspection are forwarded to you. Uptill now it was observed that MCI Inspectors were collecting the declaration forms from us after physical verification at the time of inspection only.

However, we herewith send the ready declaration forms of Kesar Sal Medical College & Research Instt., Ahmedabad.”

It was further observed that pursuant to the Council circular dated 10.11.2007, all the institutes, whether Govt. or Private whether for establishment or renewal of permission or increase of seats, except this institute – viz.- Kesar Sal Medical College & Research Institute, Ahmedabad have submitted the completed declaration forms along with endorsement/verification by the Dean and supportive documents in the office of the Council before the inspection and it is only after submission of the declaration forms the inspection has been carried out by the Council.

It was further observed that even with this letter only the Xerox copies of the first three pages of Declaration Forms of 90 teachers and Nil Residents has been received. The 4th page of the Declaration Forms containing the verification and endorsement by the Dean which is absolutely essential to verify the antecedents of the teachers have not been submitted for any teacher. No supportive documents like degree & registration certificates, experience certificate, proof of residence, TDS certificate etc., have been enclosed with Declaration Forms for any teacher. Perusal of the Declaration Forms, defective as they are, reveals that there is deficiency of teaching faculty at 33.8% and Residents at 100% as under:-

Teaching Faculty:

Professor-1 (Forensic Medicine -1)

Assoc.Prof.-7 (Anatomy -1, Pharmacology -1, Forensic Medicine -1, Community Medicine -1, TB & Chest -1, General Surgery -1 & Orthopaedics -1)

Asstt.Prof.-5 (Pharma Chemist -1, Lect. Biophysics -1, Forensic Medicine -1, Statistician -1 & General Surgery -1)

Tutor-28 (Anatomy -4, Physiology -4, Biochemistry -2, Pharmacology -4, Pathology -6, Microbiology -2, Forensic Medicine -2 & Community Medicine -4)

The deficiency of Residents is 100% as under:-

- | | | | |
|------|--------------|----|---|
| (i) | Sr. Resident | 27 | (General Medicine -4, Paediatrics -2, TB & Chest -1, Dermatology -1, Psychiatry -1, General Surgery – 4, Orthopaedics -2, ENT – 1, Ophthalmology -1, Obst. & Gynae. – 2, Anaesthesia -5 & Dentistry -3) |
| (ii) | Jr. Resident | 58 | (General Medicine -12, Paediatrics -6, TB & Chest -3, Dermatology -3, Psychiatry -3, General Surgery – 12, Orthopaedics -6, ENT – 3, Ophthalmology -3, Obst. & Gynae. – 6 & Dentistry -1) |

It was further observed that the sentence in the letter of the Director, Adarsh Foundation that “uptill now it was observed that MCI Inspectors were collecting the declaration forms from us after physical verification at the time of inspection only” is not factually correct. For the academic year 2007-08, the Declaration Forms of 121 teachers and 45 Residents were submitted by the institute in the office of the Council on 4th May, 2007 whereas the inspection for renewal of permission for admission of 4th batch of students was conducted by the Council Inspectors on 25th May and 26th May, 2007.

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 observed that it is evident that the

institute has failed to submit the Declaration Forms of the teaching faculty in proper format with supportive documentary evidence as required with the endorsement and verification of the Dean of the institute. Computation based upon the defective declaration forms submitted as they are, also reveals that there is gross deficiencies of teaching faculty (33.8%) and Residents (100%) as shown above. In the absence of such verification/endorsement by the Dean of the Institute and without any documentary evidence regarding teaching faculty, it becomes practically impossible to verify the details given in the Declaration Forms and as a consequence to carry out the inspection properly and effectively. It is therefore, evident that the institute is neither ready for renewal of permission of 5th batch of students for the academic session 2008-09 nor willing to get the inspection carried out in time for the academic year 2008-09.

The members of the Adhoc Committee and of the Executive Committee were of the opinion that such a prolonged delay in submitting the declaration forms despite repeated opportunities and reminders may give rise to suspicion in the appointment of the teaching faculty and suppression of vital facts like non-availability of the regular teaching faculty in the institute.

In view of above, the members of the Adhoc Committee and of the Executive Committee decided to reiterate its earlier decision dt. 12.05.2008 to recommend to the Central Govt. that as Kesal Sal Medical College and Research Institute, Ahmedabad is neither willing nor submitting the Declaration forms in original of teaching faculty in proper format, endorsed and verified by the Dean of the institute and with documentary evidence in support as required in spite of repeated reminders, not to issue Letter of Permission for renewal of permission for admission of 5th batch of students for the academic session 2008-2009.

91. Establishment of a new medical college at Barabanki, Uttar Pradesh by Hind Charitable Trust, Lucknow, Uttar Pradesh.

Read: The Council Inspectors report (12th June, 2008) for establishment of new medical college at Barabanki, Uttar Pradesh by Hind Charitable Trust, Lucknow, Uttar Pradesh.

The Minutes under this item may be read alongwith item No. 14.

92. Establishment of new medical college at Thiruvavur, Tamilnadu by Government of Tamilnadu.

Read: The matter with regard establishment of new medical college at Thiruvavur, Tamilnadu by Government of Tamilnadu along letter dated 13.06.2008 from the Secretary, Govt. of Tamilnadu, Health & F.W. Deptt. requesting to take up the compliance verification inspection for letter of Intent/Letter of Permission during the next academic year 2009-10.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the matter along with letter dated 13.06.2008 from the Secretary, Govt. of Tamilnadu, Health & F.W. Deptt. requesting to take up the compliance verification inspection for Letter of Intent/Letter of Permission during the next academic year 2009-10 and noted that the Executive Committee at its earlier meeting held on 12.05.2008 considered the inspection report (9th & 10th May, 2008) and decided not to recommend to issue Letter of Permission due to various deficiencies persisting in the college & now the Secretary of the Govt. of Tamilnadu has requested to arrange the inspection for compliance verification for the next academic session 2009-10.

In view of above, the Govt. of India letter dt. 15.3.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. requesting the Council to strictly adhere to the time schedule prescribed under the regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June and since, the college is not ready for inspection 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 application to the Central Govt. recommending disapproval of the Scheme for establishment of new medical college at Thiruvavur, Tamilnadu by Government of Tamilnadu as there is no provision in the I.M.C. Act, 1956 or Regulations framed there under to keep the application pending with the Council for the next academic year.

93. Establishment of new medical college at Villupuram, Tamilnadu by Government of Tamilnadu.

Read: The matter with regard establishment of new medical college at Villupuram, Tamilnadu by Government of Tamilnadu along letter dated 13.06.2008 from the Secretary, Govt. of Tamilnadu, Health & F.W. Deptt. requesting to take up the compliance verification inspection for letter of Intent/Letter of Permission during the next academic year 2009-10.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the matter along with letter dated 13.06.2008 from the Secretary, Govt. of Tamilnadu, Health & F.W. Deptt. requesting to take up the compliance verification inspection for Letter of Intent/Letter of Permission during the next academic year 2009-10 and noted that the Executive Committee at its earlier meeting held on 14.04.2008 considered the inspection report (2nd & 3rd April, 2008) and decided not to recommend to issue Letter of Permission due to various deficiencies persisting in the college & now the Secretary of the Govt. of Tamilnadu has requested to arrange the inspection for compliance verification for the next academic session 2009-10.

In view of above, the Govt. of India letter dt. 15.3.2005 issued after the directions of the Hon'ble Supreme Court in case of Mridul Dhar V/s. UOI & Ors. requesting the Council to strictly adhere to the time schedule prescribed under the regulations, 1999, the last date for sending the recommendations of the MCI for grant of Letter of Permission to the Central Govt. being 15th June and since, the college is not ready for inspection 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 application to the Central Govt. recommending disapproval of the Scheme for establishment of new medical college at Villupuram, Tamilnadu by Government of Tamilnadu as there is no provision in the I.M.C. Act, 1956 or Regulations framed there under to keep the application pending with the Council for the next academic year.

94. Medical Council of India Regulations, 2000 - Amendment in the Regulations.

Read: The letter dated 10.6.2008 received from the Govt. of India, Ministry of Health & F.W., New Delhi.

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 10.6.2008 received from the Govt. of India, Ministry of Health & F.W., New Delhi and decided to constitute a Sub-Committee comprising of the Chairman of all the Committees and Sub-Committees of the Council i.e. Dr. Indrajit Ray, Chairman, Postgraduate Medical Education Committee, Dr. D.K. Sharma, Registration & Equivalence Sub-Committee, Dr. Ved Prakash Mishra, Chairman, Finance Sub-Committee, Dr. C.V. Bhirmanandham, Chairman, TEQ Sub-Committee, Dr. Dhrubajyoti Bora, Chairman, Ethics Sub-Committee, Dr. Vijay Prakash Singh, Chairman, Migration Sub-Committee, Dr. Mukesh Sharma, Chairman, Monitoring Sub-Committee. The Committee further decided to request the Sub-Committee to place its report before the Executive Committee, at the earliest.

- The Minutes of items pertaining to Section 10A were read out and confirmed in the meeting itself and the Office was directed to send the communications to the Central Government immediately within the time limit prescribed under the Regulations.

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

New Delhi, dated the
13th & 14th June, 2008

A P P R O V E D

(DR. P.C.KESAVANKUTTY NAYAR)
PRESIDENT (ACTING)