## No.MCI-5(3)/2009-Med./

## **MEDICAL COUNCIL OF INDIA**

## **EXECUTIVE COMMITTEE**

## 15<sup>th</sup> December, 2009

Minutes of the Executive Committee meeting held on 15<sup>th</sup> December, 2009 at 11.30 a.m. in the Council office at Sector 8, Pocket 14, Dwarka, New Delhi-110077.

\*\* \*\* \*\*

## **Present:**

Dr. Ketan Desai	President,			
	Medical Council of India,			
	Professor & Head,			
	Department of Urology,			
	B.J. Medical College,			
	Ahmedabad (Gujarat)			
Dr. P.C. Kesavankutty Nayar	Vice-President,			
	Medical Council of India,			
	Former Dean,			
	Govt. Medical College,			
	Thiruvananthapuram (Kerala)			
Dr. Muzaffar Ahmad	Director,			
	Health Services,			
	Govt. of Jammu & Kashmir,			
	Srinagar (J&K)			
Dr. Baldev Singh Aulakh	Professor of Urology and Transplant Surgery,			
	Head Transplant Unit,			
	Dayanand Medical College,			
	<u>Ludhiana</u>			
Dr. P.K. Das	Professor & Head of the Deptt. of General			
	Medicine,			
	S.C.B. Medical College,			
	<u>Cuttack</u>			
Dr. V.N. Jindal	Dean, Goa Medical College,			
	Bombolim-403202,			
	Goa			
Dr. G.K. Thakur	Prof. & HOD cum Superintendent			
	Dept. of Radiology			
	S.K. Medical College,			
	Muzaffarpur-842004 (Bihar)			

Dr. Reena Nayyar -- Deputy Secretary

Apologies for absence were received from Dr. K.P. Mathur, Dr. Ved Prakash Mishra, Dr. Nirbhay Srivastav and Dr. D.J. Borah.

# 1. <u>Minutes of the Executive Committee Meeting held on 1<sup>st</sup> December, 2009 - Confirmation of.</u>

The Executive Committee of the Council confirmed the minutes of the last meeting held on 1<sup>st</sup> December, 2009 with necessary correction/addition in item No. 54 as under:-

# 54. Report of the Members of the Sub-Committee meeting held on 13.11.2009 to take stock of the alternative/innovative undergraduate medical education model, readied by the Council for its update with reference to its operationalisation.

- A standing mechanism should be created for periodic update of the curriculum for the BRMS course, so as to make it timely and relevant and also commensurate with long-term requirements. Emphasis should be given to the appropriate inclusion of various National Health Programmes at all the three phases of the study.
- District Hospital would have bed strength of not less than 300, of which 100 in Medicine & Allied specialities, 100 in Surgery & Allied specialities, 50 for Obst. & Gynae. and 25 for Paediatrics & Orthopaedics respectively for the intake of 50. For intake of 25, it would be 150 beds of which 50 would be in Medicine, 50 in Surgical specialities, 30 for Obst. & Gynae. and 10 for Paediatrics & Orthopaedics respectively. However, for North East and hilly regions the requirement would be 100 beds for the intake of 25 and 150 beds for intake of 50.
- Each Medical School will have a full time (1) Principal/Dean, (2) Medical Superintendent, (3) Professor/Associate Professor as Head of the Department (in any case not below the rank of Associate Professor, (4) minimum 1 (one) Medical Officer in pre and para clinical departments like, Anatomy, Physiology & Biochemistry, Pathology & Microbiology, Pharmacology, Forensic Medicine and Community Medicine as assigned faculty and in clinical departments like Medicine and Allied disciplines, Paediatrics, Surgical & Allied disciplines, Orthopaedics, Obst. & Gynae., each teaching clinical unit will have 2 (two) Medical Officers as assigned faculties except Unit-I which would be headed by the head of the concerned department and (5) visiting faculty (not more than 20% of total faculty strength).

The Executive Committee further decided that in order to have a wider consultation from the relevant stakeholders a National workshop be convened in the month of February, 2010 at New Delhi seeking participation of Vice-Chancellors of various Health Sciences Universities/Deemed Universities, Director, Medical Education of various States and Deans/Principals of all the medical colleges in the country.

## 2. Minutes of the last meeting of the Executive Committee – Action taken thereon.

The Executive Committee of the Council noted the action taken on the minutes of the Executive Committee meeting held on 1<sup>st</sup> December, 2009.

## 3. Pending items arising out of the decisions taken by the Executive Committee.

The members of the Executive Committee of the Council note that there is no pending items arising out of the decisions taken by the Executive Committee as on date.

The Deputy Secretary informed the members that in this regard Dr. P. Prasannaraj, Joint Secretary and Dr. Davinder Kumar, Deputy Secretary were instructed to submit the status note on 07.12.2009 with entire correspondence. Dr. Davinder Kumar, Deputy Secretary has submitted his reply on 10.12.2009 and the reply from Dr. P. Prasannaraj, Joint Secretary is awaited. On receipt of reply from Dr. P. Prasannaraj, Joint Secretary, the matter will be placed before the Executive Committee.

# 4. To note the letters of Intent/ Permission/Renewal of permission issued by the Central Govt. for establishment of medical colleges/increase of seats in Ist MBBS course for the academic session 2009-2010.

The Executive Committee of the Council noted that no Letters of Intent/Letter of Permission /renewal of permission for establishment of new Medical Colleges/ increase of seats in 1<sup>st</sup> MBBS course for the academic session 2009-2010 are issued by the Govt. of India.

## 5. Out come analysis of the decisions of the Executive Committee.

Read: The matter with regard to the out come analysis of the decision of the MCI.

The members of the Executive Committee observed that the following recommendations of the Executive Committee upon approval by the Members of the Council have been sent to Central Govt. with regard to withdrawal of recognition of various medical colleges/institutions and proposed amendments in various regulations but no response has been received from the Central Govt. till date:-

S.No.	Name of College	Status
1.	Continuance of recognition of MBBS degree granted by Maharashtra University of Health Sciences, Nashik in respect of students being trained at Dr. Panjabrao Alias Bhausabeb Deshmukh Memorial Medical College, Amravati.	Recommended to the Central Govt. on 05.06.2009 & 10.08.2009 to withdrawal of recognition and further directed to the institute not to make further admission from the academic year 2009-10.
2.	Common Entrance Test for Admission in MBBS Course.	Recommended to the Central Govt. on 23.06.2009 to accord approval of the Central Govt. u/s 33 of the IMC Act, 1956.
3.	Continuance of recognition of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore in respect of students being trained Dr. B.R. Ambedkar Medical College, Bangalore.	Recommended to the Central Govt. on 23.06.2009 to withdrawal of recognition and further directed to the institute not to make further admission from the academic year 2009-10. Thereafter, the compliance was received in the office of the Council which was inspected by the Council Inspectors on 13 <sup>th</sup> and 14 <sup>th</sup> November, 2009 and the matter alongwith the inspection report was placed before the Executive Committee at its meeting held on 17.11.2009. The matter was placed before the Executive Committee at its meeting held on 1 <sup>st</sup> December, 2009.
4.	Peoples College of Medical Sciences & Research Centre, Bhanpur - Renewal of permission for admission of 5 <sup>th</sup> batch of students for the academic session 2009-2010.	Recommended for renewal of permission for 2009-10. However, the Central Govt. Vide letter dated 20.11.2009 has requested the college authorities not to admit any fresh batch MBBS students for the academic year 2009-10.
5.	Amendment in Eligibility Criteria pertaining to the qualifying examination for entering into medical courses in Graduate Medical Education Regulations, 1997.	The Recommendations of the Executive Committee upon approved by the General Body at its meeting held on 18.11.2009, has been communicated to Central Govt. vide letter dated 25.11.2009 for approval.
6.	Amendment in the Opening of a Now or Higher Course of study or Training (including Postgraduate course of study or training) and increase of admission capacity in any course study or training (including a postgraduate course of study or training) Regulations, 2000.	The Recommendations of the Executive Committee upon approved by the General Body at its meeting held on 18.11.2009, has been communicated to Central Govt. vide letter dated 20.11.2009 for approval.
7.	Amendments in "Minimum Standard Requirement for the Medical College for 50/100/150 Admissions Annually Regulations, 1999"- Built-up area requirement for medical institution in Metropolitan cities and A-Grade cities.	The Recommendations of the Executive Committee upon approved by the General Body at its meeting held on 18.11.2009, has been communicated to Central Govt. vide letter dated 20.11.2009 for approval.
8.	Correct phase wise requirements of operation theatres in accordance with the amendments made in the Regulations	The Recommendations of the Executive Committee upon approved by the General Body at its meeting held on 18.11.2009,

with regard	to requirements to	be	has been communicated to Central Govt.
fulfilled by the	ne applicant colleges	for	vide letter dated 26.11.2009 for approval.
obtaining Lette	er of Intent and Letter	of	
Permission fo	r Establishment of N	ew	
Medical Colle	ges and yearly renew	als	
	IMC Act, 1956		

# 6. <u>KPC Medical College & Hospital, Jadavpur - Renewal of permission for admission of 3<sup>rd</sup> batch of students for the academic session 2010-2011.</u>

Read: The Council Inspectors report  $(3^{rd} \& 4^{th})$  December, 2009) for renewal of permission for admission of  $3^{rd}$  batch of students for the academic session 2010-2011 at KPC Medical College & Hospital, Jadavpur.

The members of the Executive Committee of the Council considered the Council Inspectors report ( $3^{rd}$  &  $4^{th}$  December 2009 ) and noted the following :

1(a) The following Teaching Faculty has not been considered because of the reasons mentioned below:-

Sr	Name	Department	Designation	Reason for not considering		
No						
1	Dr Kajari Sarkar	Pharmacology	Asst. Prof.	Does not possess required		
				teaching experience.		
2	Dr Ujjal Patnayak,	PSM	Asst. Prof.	Does not possess required		
				teaching experience.		
3	Dr D P Patra	Pediatrics	Professor	Does not possess required		
4	Dr Raja Lahiry			teaching experience.		
5	Dr Nripendra	Surgery	Professor	Does not possess required		
	Bhaumik			teaching experience.		
6	Dr Mitra Chanda	Dermatology	Assoc. Prof.	Does not possess required		
				teaching experience.		
7	Dr Krishna Gupta	Anesthesia	Assoc. Prof.	Does not possess required		
				teaching experience.		
8	Dr Ramanjan Sinha	Physiology	Professors	Does not possess prescribed		
9	Dr Meenakshi Sinha			qualification.		

(b) in view of above, the shortage of teaching staff required at present stage is as under:-

A	Teaching Faculty		41 out of 149	27.51 %		
	i	Professor:	3	Ped-1, Ortho-1, ENT-1		
	ii	Associate Professor :	20	Physio-2, Forensic-1, PSM-2, Med-3,		
				Ped-3, Derma-1, Surgery-2, Ortho-1,		
				OBG-1, Anaesthesia-2, Radiology-1,		
				Dentistry-1		
	iii	Assistant Professor:	14	Physio-1, Patho-1, Micro-1, PSM-1, Epi-		
				1, Stat-1, Med-1, Ortho-1, Anaesthesia-3,		
				Radiology-3		
	iv	Tutor:	4	Anatomy-2, Biochem-1, Micro-1		
В	Resi	esidents 67 out of		59.29 %		
	i	Sr. Residents	14	Med-4, Ped-1, Surg-1, Ortho-1,		
				Anaesthesia-4,Radiology-3		
	ii	Jr. Residents	53	Med-15, Ped-5, TB-1, Psych-1, Surg-		
				14,Ortho-8, ENT-1, Opth-2, OBG-5,		
				Dentistry-1		

[c] The regular Principal was absent on both the days of inspection.

## 2. Clinical material is grossly inadequate as under:-

Clinic	cal Material Available	Data observed by the Inspection team during visit on 3-12-2009	
O.P.I	D. Attendance	106	
Casu	alty attendance	3	
Adm	ission/Discharge	4/1	
Bed (	Occupancy %	28.45 %	
Oper	ative work	OP + IP	
1	Major surgical operations	2	
2	Minor surgical operations	Nil	
3	Normal Deliveries	1	
4	Caesarian Sections	3	
Radio	ological Investiagations		
1	X-ray	9	
2	Ultra-Sonography	3	
3	C.T. Scan	Nil	
4	Special Investigations	1	
Labo	ratory Investigations		
1	Biochemistry	36	
2	Microbiology	11	
3	Serology	2	
4	Parasitology	8	
5	Hematology	42	
6	Histopathology	nil	
7	Cytopathology	1	
8	Others	-	

## 3. The distribution of beds is not as per MCI norms as under:-

Special	lty	Require d Beds /Units	Data Provided by the Institution	Present Beds/Units Verified during visit of hospital on 3-12-09 by Inspection team		Remarks Deficiency of Beds
				Functiona Partly l functional		
Medicine & Medicine Allied General Medicine		130/4	130/4	30 on 3 <sup>rd</sup> floor	83 on 4 <sup>th</sup> floor	17
Specialities	Paediatrics	60/2	60/2	25 on 2 <sup>nd</sup>	25 on 3 <sup>rd</sup>	10

				floor	floor	
	TB & Chest	20/1	20/1	Nil	12 on 4 <sup>th</sup> floor	8
	Skin & VD	8/1	8/1	Nil	8 on 4 <sup>th</sup> floor	-
	Psychiatry	8/1	8/1	nil	6	2
	Sub-Total	226/9	226/9	55	134	37
Surgery & Allied Specialties	General Surgery	135/4	135/4	122 on 1 <sup>st</sup> & 2 <sup>nd</sup> floor	nil	13
	Orthopedics	56/2	56/2	50 on 2 <sup>nd</sup> floor	nil	6
	Ophthalmolo gy	20/1	20/1	nil	16 on 4 <sup>th</sup> floor	4
	ENT	18/1	18/1	12 on 3 <sup>rd</sup> floor	nil	6
	Sub-Total	229/8	229/8	184	16	29
Obstetrics & Gynecology	Obstetrics & ANC	45	45	38 on 1 <sup>st</sup> floor	nil	7
	Gynaecology	30	30	30 on 2 <sup>nd</sup> floor	nil	-
	Sub-Total	75/2	75/2	68	nil	7
GRAND TOTA	GRAND TOTAL		530/19	307	150	73

- Number of teaching units are not as per norms.
- 4. OPD: There is no review OPD in any department. Teaching area is inadequate in some clinical departments. There is no separate injection room for male and female. There is no dressing room, plaster room, plaster cutting room, E.C.G. room. There is no immunization room, family welfare clinic, dark room, refraction room, minor O.T. etc.
- 5. Each ward is not provided duty doctor room, nurse duty room, pantry, examination/procedure room and side laboratory. Teaching areas are small and some departments do not have clinical demonstration rooms and hence, they are inadequate as per MCI norms. The distance between two adjacent beds is less than 1.5 mtrs in each ward. Only one lift is provided in the hospital building which only goes up to second floor. There is no facility of the lift beyond second floor. Play area, TV, Music, Toys and Books are not provided in the Paediatric ward.
- 6. Health Center:- At RHTC, Ranabhutia, Clinical departments like Medicine, Paediatrics, Obstetrics & Gynaecology are not participating in the outreach teaching programmes. Students are not posted. Separate blocks for accommodating boys and girls is not available. Messing facilities are not available. Lecture hall cum seminar room is not available. No audiovisual aids have been provided. The labour room has nil beds. X-ray & ECG are not available. Staff as prescribed under norms are not appointed.

- 7. At U.H.C.: Delivery services are not available. Duty rosters and records of various activities and investigations are not maintained properly. Sign boards and display boards of various rooms also need to be realigned.
- 8. Central Casualty Service: There is no central suction, defibrillator, pulse oximeter and ventilator. Crash cots are not available. Radiology department, clinical laboratory & ICU are not located near casualty.
- 9. There is deficiency of six operation theatres. There is no central suction facility in the operation theatre. Pre-operative facilities are not available.
- 10. CT Scan and static x-ray unit of 500 MA was non-functional. No ultrasound machine is given to the OBGY department. Protective measures as per BARC specification are not available.
- 11. One lecture theatre each in the college as well as hospital is deficient. A.C. is not available and facility for conversion in to E-class / virtual class for teaching is not available.
- 12. Hostel: AC Visitor room, Study room with Computer and Internet is not available. Capacity of hostel for UG students as well resident doctors is inadequate.
- 13. Quarters for teaching and non-teaching staff required at this stage are not as per norms.
- 14. Medical Record Department keeps only the case sheets received from the wards and enters the classification number in computer. No other services are available in the MRD. No statistics unit is available in the MRD. The required technical staff in the MRD is not available.
- 15. In ICU there is no facility of suction with full air-conditioning.
- 16. Central Library: The central library is not air-conditioned. The area of the library is not as per MCI norms. AC Computer Room with Medlar & Internet is not available. There is no Skill Lab. Provision for e-library is not started. The number of books required at this stage are inadequate.
- 17. Pharmaco-Vigilance Committee is not established.
- 18. Animal House: Animal House is under renovation and only 8-10 sq.mt area is available for actual use. Facilities for experimental work is not available. Facilities for carrying out minor surgical procedures are also not available. There is no facility for demonstrating experimental work on animals by Computer aided education.
- 19. There is no glove inspection machine and instrument washing machine in the CSSD.
- 20. Central Research Laboratory is not established.
- 21. Information required on the website of the college is incomplete.
- 22. In the department of Anatomy, number of mounted specimen are not available as per
- 23. In the department of Biochemistry, Gas cylinders need to be kept away in a separate enclosure.
- 24. In the department of Pharmacology, number of Medicinal Plants requires to be increased.

25. In the departments of Pathology and Microbiology, numbers of Microscopes are not as per MCI norms.

26. Other deficiencies/remarks in the main report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to renew the permission for admission of 3<sup>rd</sup> batch of MBBS students for the academic year 2010-2011 at KPC Medical College & Hospital, Jadavpur.

## 7. <u>Saveetha Medical College and Hospital, Chennai - Renewal of permission for admission of 3<sup>rd</sup> batch of students for the academic session 2010-2011.</u>

Read: The Council Inspectors report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) for renewal of permission for admission of 3<sup>rd</sup> batch of students for the academic session 2010-2011 at Saveetha Medical College and Hospital, Chennai.

The members of the Executive Committee of the Council considered the Council Inspectors report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) and decided to recommend to the Central Govt. to renew the permission for admission of 3<sup>rd</sup> batch of 150 (one hundred fifty) MBBS students at Saveetha Medical College and Hospital, Chennai for the academic session 2010-2011.

# 8. <u>Rajarajeswari Medical College & Hospital, Bangalore - Renewal of permission for admission of 6<sup>th</sup> batch of students for the academic session 2010-2011.</u>

Read: The Council Inspectors report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) for renewal of permission for admission of 6<sup>th</sup> batch of students for the academic session 2010-2011 at Rajarajeswari Medical College & Hospital, Bangalore.

The members of the Executive Committee of the Council considered the Council Inspectors report ( $3^{rd}$  &  $4^{th}$  December 2009 ) and noted the following:-

- 1. (a) The shortage of teaching faculty is 36.52% as under:-
- i) Professor 04 (1TB & Chest, 1Psychiatry, 1 Ophthalmology, 1 Radiodiagnosis)
- ii) Assoc. Prof. 06 (1 Forensic Medicine, 1 PSM, 1 Medicine, 1 Paediatrics, 1 Surgery 1 Radiodiagnosis)
- iii) Asst. Prof. 13 (1 Anatomy, 1 Physiology, 1 Microbiology, 1 Biochemistry, 1 Epidemiologist Cum Asstt Prof, 1 Statistician cum Asstt Prof , 1 Medicine , 1 TB & Chest, 1 Surgery , 1 ENT , 1 Ophthalmology, 1 A.N.M.O, 1 M.W.O)
- iv) Tutor 19 (1 Anatomy, 4 Physiology, 2 Bio- Chemistry, 2 Pharmacology, 5 Pathology, 1 Micro Biology, 1 Forensic Medicine, 3 PSM)
- (b) The shortage of residents is 85.71% as under :-
- i) Sr. Resident 19 (4 Medicine ,2 Paediatrics, 1 Dermatology, 4 Surgery, 1 Orthopaedics, 1 OBG, 3 Anaesthesia, 3 Radio-diagnosis)
- ii) Jr. Resident 53 (11 Medicine, 6 Paediatrics, 3 TB & Chest, 2 Dermatology, 2 Psychiatry, 12 Surgery, 6 Orthopaedics, 2 ENT, 3 Ophthalmology, 6 OBG)

## 2. Clinical material is inadequate as under:-

	Day of Inspection			
	3	32		
Casualty attendance				
Bed occupancy%	30	)%		
Number of normal deliveries	0	0		
Number of caesarian Sections	0	2		
Radiological Investigations	O.P.	I.P.		
	35	04		
X-ray	28	01		
Ultrasonography	02	01		
Special Investigations	02	00		
C.T. Scan				
<u>Laboratory Investigations</u>				
	68	40		
Biochemistry	22	07		
Microbiology	17	04		
Serology	04	02		
Parasitology	195	68		
Haematology	-	-		
Others				

- 3. At RHTC: L.M.O. is not available. X-ray & ECG are not available.
- 4. At UHC: Delivery services are not available. No beds have been provided. Facilities for diagnostic investigations and minor Surgery are not available
- 5. Animal House: Facilities for experimental work are not available.
- 6. Central library Medlar Facilities are not available.
- 7. Residential quarter: No quarters are available for non teaching staff.
- 8. CSSD: Bowl sterlizer, glove inspection machine, and ultrasound instrument cleaning machine are not available.
- 9. Intensive care: Paediatric ICU, Burns ICU & Obst. ICU are not available.
- 10. Other deficiencies/remarks as pointed out in the inspection report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to renew the permission for admission of  $6^{\rm th}$  batch of MBBS students for the academic year 2010-2011 at Rajarajeswari Medical College & Hospital, Bangalore.

# 9. NKP Salve Institute of Medical Sciences, Nagpur – Renewal of permission for admission of 2<sup>nd</sup> batch of students against increased intake i.e. from 100 to 150 for the academic session 2010-11.

Read: The Council Inspectors report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) for renewal of permission for admission of 2<sup>nd</sup> batch of students against increased intake i.e. from 100 to 150 for the academic session 2010-2011 at NKP Salve Institute of Medical Sciences, Nagpur.

The members of the Executive Committee of the Council considered the Council Inspectors report ( $3^{rd}$  &  $4^{th}$  December 2009 ) and noted the following :

- 1. The shortage of teaching staff required at present stage is as under:-
- (a) The shortage of teaching faculty is 32.2% (i.e. 50 out of 155) as under :-
  - 05 (Pharmacology -1, TB & Chest - 1, Dermatology-1, (i) Professor Psychiatry-1, Radio-Diagnosis-1) (Physiology-1, Pathology-1, TB & Chest-1, Dermatology-07 (ii) Assoc.Prof. 1, Psychiatry-1, General Surgery-1, Radio-Diagnosis-1) (iii) Asst.Prof. 21 (Biochemistry-1, Pathology-4, Pharmacology-1, FMT-1, Community Medicine-1, General Medicine-1, Paediatrics-2, General Surgery-7, ENT-1, Obgy-1, Radio-Diagnosis-1) (Anatomy-3, Physiology-4, Biochemistry-3, Pathology-4, 17 (iv) Tutor Microbiology-1, Forensic Medicine-2,)
- (b) The shortage of Residents is 21.1% (i.e. 18 out of 85) as under:-
  - (i) Sr. Resident 10 (TB & Chest -1, General Surgery-3, Orthopaedics-1, Ophthalmology-1, Radio-Diagnosis-4)
  - (ii) Jr. Resident 08 (TB & Chest-3, ENT-2, Ophthalmology-3)
- 2. Clinical material is inadequate as under:-

	Day of Inspection
O.P.D. attendance	414
	09
Casualty attendance	
Bed occupancy%	43.1%
Operative work	09
Number of major surgical operations	14
Number of minor surgical operations	02
Number of normal deliveries	01
Number of caesarian Sections	
Radiological Investigations	
	47
X-ray	26
Ultrasonography	02
Special Investigations	03
a = a	
C.T. Scan	
M.R.I.	
<u>Laboratory Investigations</u>	
	205
Biochemistry	12
Microbiology	21
Serology	05
Parasitology	218
Haematology	03
Histopathology	02
Cytopathology	
Others	

- The Radiological and Laboratory work load was found to be low. No reporting of the lab investigations was done on the previous 2 days.
- There was a variation in the OPD data collected from the departments and the data provided by the Institution.

## 3. Distribution of beds is not adequate as per MCI norms as under:-

Speciality	Required Beds/Units	Present Beds/Units	Remarks
	2 COST CITED	2 Cos, Cincs	
Medicine & Allied Specialities	144/4	142/4	2 Beds
General Medicine	24/1	22/1	2 Beds
TB & Chest	30/1	28/1	2 Beds
Psychiatry			
Surgery & Allied Specialities			
	144/4	123/4	21 Beds
General Surgery	72/2	71/2	1 Bed
Orthopaedics			
Obstetrics & Gynaecology			
Obstetrics & ANC		40	
		26	
Gynaecology	72/2	66/2	6 Beds
Total	, _, _		
G I T I	648/19	614/19	34 Beds
Grand Total			

- There was overcrowding of beds in all the departments.
- 4. At RHTC, 10 beds are available for admission but no patients.
- 5. At UHC: Delivery services are not available.
- 6. Mortuary: No postmortems are presently conducted in the mortuary.
- 7. Other deficiencies/remarks as pointed out in the inspection report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to renew the permission for admission of  $2^{nd}$  batch of students against increased intake i.e. from 100 to 150 for the academic session 2010-11.

# 10. <u>Alluri Sitaram Raju Academy of Medical Sciences, Eluru – Renewal of permission for admission of 2<sup>nd</sup> batch of students against increased intake i.e. from 100 to 150 for the academic session 2010-11.</u>

Read: The Council Inspectors report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) for renewal of permission for admission of 2<sup>nd</sup> batch of students against increased intake i.e. from 100 to 150 for the academic session 2010-2011 at Alluri Sitaram Raju Academy of Medical Sciences, Eluru.

The members of the Executive Committee of the Council considered the Council Inspectors report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) and decided to recommend to the Central Govt. to renew the permission for admission of 2<sup>nd</sup> batch of MBBS students against the increased intake i.e. from 100 (Hundred) to 150 (One hundred fifty) at Alluri Sitaram Raju Academic of Medical Sciences, Eluru for the academic session 2010-2011.

# 11. <u>Inspection of Maharajah's Institute of Medical Sciences, Nellimarla, Andhra Pradesh to verify the teaching faculty, resident, clinical material, hostel and other infrastructural facilities.</u>

Read: The compliance verification inspection report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) along with Council Inspectors report (1<sup>st</sup> & 2<sup>nd</sup> Sept.,2009) of Maharajah's Institute of Medical Sciences, Nellimarla, Andhra Pradesh with regard to verify the teaching faculty, resident, clinical material, hostel and other infrastructural facilities.

The members of the Executive Committee of the Council considered the compliance verification inspection report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) along with Council Inspectors

report (1<sup>st</sup> & 2<sup>nd</sup> Sept.,2009) and decided that the Council should process the applications for starting of postgraduate courses at Maharajah's Institute of Medical Sciences, Nellimarla, Andhra Pradesh for further necessary action.

## 12. <u>Story "Capitation fees in 2 U.P. Medical College", telecast on Sahara Samay on 15.09.2009 & 16.09.2009.</u>

Read: The matter with regard to Story "Capitation fees in 2 U.P. Medical College", telecast on Sahara Samay on 15.09.2009 & 16.09.2009.

The members of the Executive Committee of the Council considered the matter with regard to Story "Capitation fees in 2 U.P. Medical College", telecast on Sahara Samay on 15.09.2009 & 16.09.2009 and observed that the Council office has sent letter on 16.09.2009 by fax, e.mail and Courier to Sahara Samay channel to provide the full unedited transcript with recording, other material and record available with the channel at the earliest for further necessary action by the Council and further observed that reminders were also sent on 24.09.2009, 30.11.2009 and 07.12.2009. The Sahara Samay Channel did not provide the Council the full unedited transcript with recording, other material and record available with them till date.

In view of above, the members of the Executive Committee of the Council decided to direct the Council office to treat the matter as closed in absence of the receipt of necessary documents and cogent material from Sahara Samay channel.

13. Consideration of letter dated 30.10.2009 of the Association of Indian Universities with regard to the Story "Seat-for-sale scam in 2 med. colleges", telecast on the TV Channel 'Times Now' on 03.06.2009 & News Story (1) "UPA minister-run medical college wants Rs. 20L donation" & "No receipt for donation" published in the Times of India dated 03.06.2009 and (2) "Govt. probes seat-for-sale scam, may derecognize (2) med colleges", published in The Times of India dated 04.06.2009.

Read: The letter dated 30.10.2009 of the Association of Indian Universities with regard to the Story "Seat-for-sale scam in 2 med. colleges", telecast on the TV Channel 'Times Now' on 03.06.2009 & News Story (1) "UPA minister-run medical college wants Rs. 20L donation" & "No receipt for donation" published in the Times of India dated 03.06.2009 and (2) "Govt. probes seat-for-sale scam, may derecognize (2) med colleges", published in The Times of India dated 04.06.2009

The members of the Executive Committee of the Council observed that matter with regard to story "Seat-for-sale scam in 2 med colleges", telecast on the TV channel 'Times Now' on 03.06.2009 & News Story (1) "UPA minister-run medical college wants Rs. 20L donation" & "No receipt for donation" published in the Times of India dated 03.06.2009 and (2) "Govt. probes seat-for-sale scam, may derecognize 2 med colleges", published in the Times of India dated 04.06.2009 was placed before the Executive Committee at its meeting held on 26<sup>th</sup> June 2009 and the Committee decided as under:-

"The members of the Executive Committee observed the video clip of the episode provided by the channel "Times Now" and perused the transcripts. It was observed that the President of the Council had constituted a 3 members committee comprising of:-

- (1) Dr. Indrajit Ray, Pro-Vice Chancellor, West Bengal University of Health Sciences, Kolkata and Chairman, Postgraduate Committee, MCI- Chairman of the Committee.
- (2) Dr. D.J. Borah, Principal, Jorhat Medical College, Jorhat (Assam) & Member, Executive Committee, MCI- Member of the Committee
- (3) Dr. Muzaffar Ahmed, Director, Health Services, Govt. of Jammu & Kashmir, & Member, Executive Committee, MCI Member of the Committee

This 3 members committee had been requested to inquire into the episode of a sting operation telecast on a TV channel showing demand for capitation fee being made on the screen on behalf of (1) Sri Ramachandra Medical College & Research Institute and (2) Sri Balaji Medical College & Hospital of Chennai and the news stories (1) "UPA minister run medical college wants Rs. 20 L donation" published in the Times of India dt. 03.06.2009 and (2) "Govt. probes seat for sale scam, may derecognize 2 med colleges" published in the Times of India dated 04.06.2009.

This committee of the MCI had conducted its inquiry exercise and for this purpose had also visited both these institutions during the period  $17^{th}$  to  $20^{th}$  of June 2009. Besides meeting the officials / representatives of these two institutions, the members of this committee had also met the following authorities:-

- i) Principal Secretary Medical Education, Govt. of Tamil Nadu
- ii) Director Medical Education, Govt. of Tamil Nadu
- iii) Hon'ble Justice (Retd.) M. Thanikachalam, Chairman of the Admission Monitoring Committee of the State of Tamil Nadu
- iv) Hon'ble Justice (Retd.) N.V. Balasubramanian, Chairman, Fee Fixation Committee of the State of Tamil Nadu.

An elaborate report has been prepared by the committee dt.21.6.09. The copy of the report was read and discussed at length. The analysis of the material and the recommendation made by the 3 members committee had also been perused and discussed by the members of the Executive Committee in its meeting for this purpose held on 26.6.09.

Upon consideration of the report and the discussion thereupon the Executive Committee decided to fully endorse the analysis made by the 3 members committee in their report dt. 21.6.09 and further decided to accept the recommendation made in the report dt. 21.6.09. Accordingly, the Executive Committee decided to recommend the following for further consideration and necessary action by the concerned authorities:-

- i). Let there be a mechanism in place, as early as possible, for one solitary common entrance test to be held for all the medical colleges / institutions / deemed Universities be held by one agency designated by the Govt. of India for selection of most meritorious candidates for admission to MBBS seats. It would be relevant to state here that the Executive Committee of the Council in its meeting held on 10<sup>th</sup> and 11<sup>th</sup> June 09 had already made this recommendation and which has also been forwarded to the Govt. of India on 23.6.09 and decided to reiterate the same.
- ii) Pending that exercise for putting in place an effective and efficient mechanism of holding one solitary common entrance test for selection of students on the basis of their merit for admission in the MBBS course in all the medical institutions all over the country, it is recommended that no medical college / institution / deemed university including these two institutions at Tamil Nadu are allowed to make admissions in the MBBS course on the basis of their own common entrance test and they are compelled to secure the names of the meritorious candidates from the merit list prepared by the respective State Govt. on the basis of the common entrance test conducted by the respective State Govt. authorities.
- iii) It is not possible to accept the version of these two institutions regarding the contents of the TV visuals and it does not appear to be a folly of only one or two individuals and others in the university or in the deemed university as such, has no role to play in this. The local authorities may consider and decide for further inquiry regarding the contents of the TV visuals.

The above-mentioned minutes of the meeting of the Executive Committee of the Council were read and confirmed in the meeting itself.

<u>Office Note:</u> The Executive Committee of the Council directed the office to send the abovementioned recommendations and the report of the 3 members committee dt. 21.6.09,

immediately to the Secretary, Ministry of Health, Govt. of India and the copies thereof be also sent to the following authorities:-

- 1. Secretary, Ministry of Human Resources Development, Govt. of India
- 2. Secretary Universities Grant Commission, New Delhi
- 3. Principal Secretary, Medical Education, State Govt. of Tamil Nadu
- 4. Hon'ble Justice (Retd.) M. Thanikachalam, Chairman of the Admission Monitoring Committee of the State of Tamil Nadu
- 5. Hon'ble Justice (Retd.) N.V. Balasubramanian, Chairman, Fee Fixation Committee of the State of Tamil Nadu."

The decision of the Executive Committee was communicated to all the above authorities vide Council office letter dated 26.06.2009.

Now, in reference to the aforesaid matter the Council office had received a letter No. 23993/MCA1/2009-1 dated 02.10.2009 from the Principal Secretary to Govt. of Tamil Nadu, Health and Family Welfare (MCA) Department, Chennai whereof the operative part reads as under:-

"

In this connection, I am to state that with reference to the recommendation that no medical college/institution/ Deemed university including the two institutions viz. (i) Sree Balaji Medical College and Hospital and (ii) Sri Ramachandra Medical College, Porur at Tamil Nadu are allowed to make admissions in the MBBS course on the basis of their own common entrance test and they are compelled to secure the names of the meritorious candidates from the merit list prepared by the respective State Government on the basis of the common Entrance Test conducted by the respective State Government, authorities, the State Director of Medical Education has stated that the above recommendation cannot be implemented for the following reasons:-

- a) As per the mandate give under UGC Act, the Deemed University are empowered to conduct entrance test for admission of candidates to various courses conducted by the Deemed University concerned. Therefore, the State Government cannot decide or the matters covered under the UGC Act and as also held by the Hon'ble Supreme Court in the case filed by Bharati Vidyapeeth (Deemed University), Pune.
- b) According to the recommendation, Christian Medical College, Veelore which is the only affiliated Medical College which conducts its own entrance test in Tamil Nadu has also to take candidates from State Government's Entrance Test. When Christian Medical College, Vellore was not under the enquiry list of the Medical Council of India Enquiry Committee and conducting its own entrance test based on Hon'ble Supreme Court order, the State Government cannot take any positive decision on the recommendation No. (ii)
- c) The other Deemed Universities which have conducted their own entrance test for admission to MBBS course in Tamil Nadu are (i) SRM Deemed University, (ii) Meenakshi Deemed University (iii) Chettinad Deemed University, (iv) Saveetha Deemed University and (v) Dr. M.G.R. Deemed University, These Deemed University were also not in the enquiry list of the Medical Council of India Enquiry committee. Hence, it will be unlawful to consider the recommendation No. (ii) in respect of these Deemed University.
- More importantly, in all the Medical Educational Institutions in Tamil Nadu (which have conducted their own entrance Test and Selected candidates for admission to MBBS courses base on the performance of the candidates in that entrance test) including the two institutions which were enquired by the Medical Council of India Enquiry Committee, the admission process is over and candidates are already pursuing their Ist year MBBS course. therefore, there are practical difficulties in implementing the recommendation No. (ii) to the Medical Council of India Executive Committee.

- e) Regarding recommendation No. (iii) which states that ....."the local authorities may consider and decide for further enquiry regarding the contents of the TV visuals" it is submitted that as directed by the Hon'ble Supreme Court of India in Bharathi Vidyapeeth (Deemed University), Pune Vs. State of Maharashtra, the State Government cannot interfere with the affairs of the Deemed University which come under the purview of the UGC Act, 1956.
- 3. However, the Director of Medical Education has state that the following details have been called for from all Government Medical College/Private Medical Colleges including deemed Universities in Tamil Nadu.
- (i) The details of exam conducted by the College/University to select the merit candidates for the academic year 2009-10.
- (ii) The date and months of the Ist Year MBBS course for the current year started.
- (iii) The name and date of admission of the last candidate in Ist Year MBBS of the College.
- 4. He has further stated that the MBBS admission to the year 2009-10 are over almost in all medical colleges as well as private medical colleges including deemed university. Nearly 1480 students were admitted in 15 Government Medical College besides 348 students were admitted in the 5 self financing Colleges through Selection Committee for the year 2009-10. In view of the above circumstances, the State Director of Medical Education is of the opinion that it is not traceable to conduct solitary Common Entrance Examination for admitting the students to the Medical Institutions run by State Government as well as the Deemed universities and conducting Entrance Examination as recommended by the Medical Council of India /Government of India will lead to legal complications and will be against the sprit of judgment pronounced by Supreme Court of India in the case of Bharat Vidyapeeth (Deemed University) Pune Vs. State of Maharasthra.
- 5. I am also to inform that in the State of Tamil Nadu common Entrance Test for admission to Medical Students in the Government Medical Colleges has been abolished by way of legislation i.e. Tamil Nadu admission in professional Educational Institution Act, 2006 (Tamil Nadu Act 3 of 2007) after obtaining the assent of the President of India.
- 6. In the light of the above position I am to request you to place the above facts before the Government of India/Medical Council of India and further course of action to be followed by this Government in this matter may kindly be communicated at the earliest. "

The above matter was considered by the Executive Committee at its meeting held on 08.10.2009 and the committee decided to refer the matter to the Central Government, Ministry of Health & F.W. for information and necessary action.

The above decision was communicated to Central Government vide letter dated 09.11.2009.

Now Prof. Beena Shah, Secretary General, Association of Indian Universities, New Delhi vide letter No. MEET/SC/300/2009/17439 dated 30.10.2009 (received in this office on 05.12.2009) addressed to President, Medical Council of India stating therein as under:

"The Standing Committee of the Association at its 300<sup>th</sup> Meeting held on October 1, 2009 considered the reply given Dr. S Rangaswami, Vice Chancellor, Sri Ramchandra University, Chennai on the show cause notice issued to the University by the Ministry of Human Resource Development, Government of India on allegedly demanding capitation fee for securing admission to MBBS Programme from prospective students/parents and resolved to send a copy of the same to MHRD, UGC and MCI.

Accordingly, a copy of the letter No. VC/AIU/2009 dated July 31, 2009 received from Dr. S Rangaswami, Vice Chancellor, Sri Ramachandra

University. Porur is enclosed for your information and necessary action."

As per enclosed letter no. VC/AIU/2009 dated 31<sup>st</sup> July 2009 received from Dr. S Rangaswami Vice Chancellor, Sri Ramchandra University, they have furnished the following:

"In the Special Emergency meeting of the Board of Management held on 5<sup>th</sup> June 2009, the Vice – Chancellor informed the members about the media reports that appeared in the daily "Times of India" dated the 3<sup>rd</sup> June 2009 and in the Times Now TV Channel, in regard to alleged information given by Mr. A.Subramaniyan, Deputy Registrar. The V.C. also informed the Board that capitation fee is strictly prohibited and no such practice is allowed in respect to admission in the University. The members were of the view that the matter should be thoroughly enquired into. The Vice-Chancellor further informed the members that the Ministry of Human Resource Development has issued a Show cause notice dated 04.06.2009 on the basis of information available with the Government.

The Vice – Chancellor constituted an Enquiry Committee to enquire into the matter which has submitted its report and the same was placed before the meeting of the Board of Management held on 11.07.2009. The Chairman informed the members that in the enquiry report it has been reported that as per Mr. A Subramaniyan's statement, he was giving information regarding probable amount needed for seeking admission under NRI seats in other institution in other States and Bangalore in order to help the parent who persistently pleaded for help in getting admission to her ward under NRI seat in any other institution. The information he gave was not relatable to Sri Ramachandra University. For his carelessness or negligence at work in the discharge of official duties in the office premises he was awarded punishment under Disciplinary Bye-laws of the University. The matter was brought before the Board of Management in its meeting held on 11.07.2009 and the Board resolved to accept the enquiry report and approved the action taken by the Vice-Chancellor in this regard.

Vice – Chancellor also informed the Board of Management in its meeting held on 11.07.2009 that the Ministry of Human Resource Development has issued a show cause notice on the basis of information in possession of the Government. The University had submitted a detailed explanation dated 18.06.2009 to the show cause notice dated 04.06.2009 issued by the MHRD. He also informed that the Medical Council of India has sent a Fact Finding Committee which visited the University on the 17<sup>th</sup> and 18<sup>th</sup> June 2009. He further informed that the UGC has also sent a Fact Finding Committee which visited the University on the 19<sup>th</sup> June 2009."

After due and detailed deliberations, the members of the Executive Committee of the Council decided that the letter received from Prof. Beena Shah, Secretary General, Association of Indian Universities, New Delhi along with letter dated 31<sup>st</sup> July 2009 received from Dr. S Rangaswami Vice Chancellor, Sri Ramchandra University be also sent to the Central Govt. Ministry of Health & F.W. (MoH&FW), Ministry of Human Resource Development (MHRD) and University Grants Commission for information and necessary action.

## 14. <u>Admissions of excess students under Management quota at various private medical colleges in the State of Kerala for the academic year 2009-10.</u>

Read: The matter with regard to Admissions of excess students under Management quota at various private medical colleges in the State of Kerala for the academic year 2009-10.

The members of the Executive Committee of the Council noted that the following medical colleges/institutes have admitted students in excess under Management quota at their medical colleges against the ratio fixed by the State Govt.:-

Name	of	the	Sancti	oned	Ratio	o fixe	d by	Students	Students	No. of
College			Intake	for	the	5	State	admitted	admitted	Excess
			the		Gove	ernme	nt	under	under	Admission
			Acade	mic	for	the	year	Government	Management	under
			Year	2009-	2009	9-10		Quota	Quota	Management
			10							quota
Azeezia	Instt.	of	10	00		50:50		48	52	2
Medical Sciences,		ces,								
Kollam										
Sree	Naray	ana	100		;	50:50		47	53	3
Instt. of	f Medi	ical								
Sciences	, Chalal	ka								

The members of the Executive Committee of the Council after detailed deliberations decided that suitable communication be sent to the concerned State Govt. for the respective medical colleges/institutions where the admissions have been made by them in excess for the academic year 2009-10 by calling upon them to correspondingly reduce the admissions in Management quota for such colleges for the academic year 2010-2011 and for corresponding increased allocation of the free seat candidates by the concerned State Govt. for the academic year 2010-2011 so as to set-off the undue advantage gained by such medical colleges/institutions by making excess admissions in the management quota in the academic year 2009-10.

# 15. Discharge of 1<sup>st</sup> Year MBBS students who have been found not eligible in terms of Regulation 5(5)(ii) as prescribed in the Graduate Medical Education Regulations, 1997 and admitted at various medical colleges/institutions in India for the Academic Year 2009-2010.

Read: The matter with regard to discharge of 1<sup>st</sup> Year MBBS students who have been found not eligible in terms of Regulation 5(5)(ii) as prescribed in the Graduate Medical Education Regulations, 1997 and admitted at various medical colleges/institutions in India for the Academic Year 2009-2010.

The members of the Executive Committee of the Council noted that the Council office vide its letter dated 07.12.2009 has issued the discharge notice in respect of following students of various medical colleges as they are not eligible in terms of the Regulation 5(5)(ii) as prescribed in the Graduate Medical Education Regulations, 1997 in as much as they have not passed the entrance examination with minimum required percentage of marks:-

Sl. No.	Name of the College	Name of Student	Category	Marks in Entrance
110.				Examination
1.	Netaji Subhas Chandra Bose Medical College, Jabalpur	Ms.Manmohan Singh	ST/X	73/200
2.	Hind Instt. Of Medical Sciences, Barabanki	Ms. Lekhika Singh	GEN	99/200
3.	Rajendra Instt. Of Medical Sciences, Ranchi	Anita Toppo	ST	59/150
		Neelam Kalundia	ST	57/150
		Rashmi Singh Kuntia	ST	57/150
		Diljeet Bodra	ST	56.5/150

		Sujit Kumar Murmu	ST	56/150
		Seth Kachhap	ST	55.75/150
		Kumar Vidyacharan	ST	55/150
		Birua		
		Priyanka Bhagat	ST	54.25/150
		Umesh Kumar singh	ST	52.25/150
		Amit Anand	ST	52.25/150
		Anish Deepak Baxia	ST	52.25/150
		Jyoti Kumari	ST	52.25/150
		Gaurav Bhim Murmu	ST	52/150
4.	Geetanjali Medical College, Udaipur	Sameer Hasan	Gen.	190/600
		Priyanka Sharma	Gen.	180/600
		Shreya Patel	Gen.	167/600
		Vinay Gehlot	Gen	160/600
		Harpran Singh Deol	Gen.	212/800
		Amrit Raj Kalla	Gen.	158/600
		Rohit Tak	SC	145/600
		Deepika	OBC	143/600
		Ruchir Dashora	Gen	129/600
		Rohit Kumar	SC	123/600
		Divya Sharma	Gen	106/600
		Ashish Sharma	Gen.	106/600
		Swati	OBC	104/600
		Farraha Qureshi	OBC	65/600
		Deepali Jain	Gen.	65/600
		Manaswi Gupta	Gen.	60/600
		Gaurav Agarwal	Gen.	59/600
		Monika	OBC	57/600
		Vikash Sharma	Gen.	54/600
		Ramkesh Choudhary	OBC	53/600
		Rajendra Singh	Gen.	18/600
		Rajpuohit		
		Gaurav Gupta	Gen.	17/600
		Prachita Gaur	Gen.	17/600

# 16. <u>Admissions of excess student under NRI quota at Aarupadai Veedu Medical College Pondicherry for the academic year 2009-10.</u>

Read: The matter with regard to Admissions of excess students under NRI quota at Aarupadi Veedu Medical College Pondicherry for the academic year 2009-10.

The members of the Executive Committee of the Council noted the list of students received from the Principal, Aarupadai Veedu Medical College, Pondicherry and observed that the Aarupadai Veedu Medical College, Pondicherry has admitted 16 students under NRI Quota while it could not have made more than 15 admissions in the NRI Category in the Academic Year 2009-2010 which resulted the admission of 01 excess student in the NRI Quota at the said college.

In view of above, the members of the Executive Committee decided that the college be informed to ensure that it shall not make more than 14 admissions in the NRI Category in the next Academic Year i.e. 2010-2011, so as to offset the undue advantage gained by admitting 01 student in the NRI Category in excess of permission 15% intake of 100 seats.

## 17. <u>Issue of task shifting involves medical practitioners.</u>

Read: The e.mail dated 17.11.2009 received from the Registrar, Medical & Dental Practitioners Council of Zimbabwe with regard to views on the concept of task shifting forwarded by IAMRA.

The members of the Executive Committee of the Council considered the e.mail dated 17.11.2009 received from the Registrar, Medical & Dental Practitioners Council of Zimbabwe with regard to views on the concept of task shifting forwarded by IAMRA and was of the view that as the matter in question is outside the ambit of the authority and jurisdiction of the Council, hence, it is neither open nor permissible for the Council to furnish any opinion thereon. The Registrar, Medical & Dental Practitioners Council of Zimbabwe be informed accordingly.

18. To consider the letter dated 01.12.2009 received from the Registrar, Datta Meghe Institute of Medical Sciences (Deemed University) Nagpur – Inclusion of the name of Datta Meghe Institute of Medical Sciences (Deemed University) Nagpur, in the schedule first of the Indian Medical Council Act, 1956 – Thereby recognition of all the academic courses conducted by J.N. Medical College Swangi, Wardha...

Read: The letter dated 01.12.2009 received from the Registrar, Datta Meghe Institute of Medical Sciences (Deemed University) Nagpur – Inclusion of the name of Datta Meghe Institute of Medical Sciences (Deemed University) Nagpur, in the schedule first of the Indian Medical Council Act, 1956 – Thereby recognition of all the academic courses conducted by J.N. Medical College Swangi, Wardha.

The members of the Executive Committee of the Council considered the letter dated 01.12.2009 received from the Registrar, Datta Meghe Institute of Medical Sciences (Deemed University), Nagpur informing as under and requested that necessary changes in the schedule, be made as the MBBS Degree to the above students shall be awarded by Datta Meghe Institute of Medical Sciences (Deemed University):-

··

- 1. Datta Meghe Institute of Medical Sciences has been granted "Deemed University" status vide notification issued by Govt. of India, Ministry of Human Resource Development, New Delhi No. F.9-48/2004-U.3 dated 24<sup>th</sup> May 2005.
- 2. Jawaharlal Nehru Medical College is one of the constituent colleges under the above named Deemed University.
- 3. The first batch of 150 students was admitted and enrolled under this University from the session 2005-2006 and is now appearing for the Final M.B.B.S. (Part-II) examination, which is being conducted during the period 16<sup>th</sup> November 2009 to 12<sup>th</sup> December 2009.

The members of the Executive Committee of the Council further observed that at its meeting held in June, 1988, the Executive Committee 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 1<sup>st</sup> Schedule to the I.M.C. Act,1956 unless the Executive Committee decides otherwise."

In view of above, the members of the Executive Committee of the Council decided that recognition/approval of M.B.B.S. qualification be granted in respect of Datta Meghe Instt. of Medical Sciences (Deemed University) was recognized/approved when granted by Maharashtra University of Health Sciences, Nashik in respect of students being trained at J.N.Medical College, Swangi, Wardha.

# 19. <u>Sri Manakula Vinayagar Medical College & Hospital, Pondicherry - Renewal of permission for admission of 5<sup>th</sup> batch of students for the academic session 2010-2011.</u>

Read: The Council Inspectors report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) for renewal of permission for admission of 5<sup>th</sup> batch of students for the academic session 2010-2011 at Sri Manakula Vinayagar Medical College & Hospital, Pondicherry.

The members of the Executive Committee of the Council considered the Council Inspectors report ( $3^{rd}$  &  $4^{th}$  December 2009) and noted the following:

1. (a) The following faculty members / Residents were not counted while computing staff strength for the following reasons.

Sl.	Name of the	Designation	Department	Reason of not being
No	Faculty/ Resident	_	_	counted
1	Dr. Viswanathan	Professor	General Medicine	Does not posses prescribed academic qualification.
2.	Dr. S. Girija	Assistant Professor	General Medicine	Does not posses prescribed academic qualification.
3.	Dr. Murugan	Professor	Orthopedics	Does not have requisite 5 years teaching experience as Assistant Professor and 4 years as Associate professor. No publications.
4.	Dr. Pragash	Sr. Resident	Orthopedics	3 years requisite Jr. Residency not completed.
5.	Dr. S. Vetrikodi	Associate Professor	ENT	Does not posses prescribed academic qualification.
6.	Dr. K. Nivedita	Sr. Resident	OB&Gyn	3 years requisite Jr. Residency not completed.
7.	Dr. Jayasree	Sr. Resident	OB&Gyn	3 years requisite Jr. Residency not completed.
8.	Dr. Poomalar	Sr. Resident	OB&Gyn	3 years requisite Jr. Residency not completed.
9.	Dr. Ilavarasi Sindhuja	Sr. Resident	Radiodiagonsis	Joining letter dated 13.06.09, Appoint. Letter dated 27.07.09 Discrepancy in appointment and joining dates.

During the inspection while checking the Declaration forms the following teacher informed that she had given wrong information in her declaration form, the details are as under: -

Sl. No	Name of the Faculty/ Resident	Designation	Department	Reason of not being counted
1	Dr. Shanmugapriya	Sr.Resident	Radio diagnosis	Given wrong information.  Details of experience column showed her working in this college from 03.04.2006 till date. i.e up to 3 <sup>rd</sup> December 2009. Whereas from May 2006 to February 2009 she was not

: 23

	working in this institution as she informed during inspection and wrote on the declaration form that she was doing DNB
	in some other institution.

- (b) In view of above, the shortage of teaching staff required at present stage is as under:-
  - (i) Faculty 57.2% (i.e. 87 out of 152)
  - :Community Medicine-1, Peadetrics-1, TB&Chest-1, (i) Professor: 11

Skin&VD-1, Psychiatry -1, Orthopeadics -1, ENT -1, Opthalmology -1, Anaesthesiology - 1, Radiodiagnosis- 1,

Dentistry -1

(ii) **Associate Professor** : Physiology – 1, Biochemistry -1 Pathalogy -2 Microbiology-

1, Community Medicine 1, General Medicine – 5, Peadiatrics –

3, TB&Chest – 1, General Surgery – 3, Orthopaedics – 1,

Anaesthesiology -2, Radiodiagnosis -2.

(iii) **Assistant Professor:** : Anatomy – 3, Physiology – 2, Pharmacology – 2, Pathology – 30

1, Forensic Medicine – 2, Community Medicine – 5, General

Medicine -5, TB&Chest -1, General Surgery -3,

Orthopaedics -1, OB&Gyn – 2, Radiodiagnosis-2, Dentistry –

22 :Physiology -1, Biochemistry – 4, Pharmacology -2, Pathology (iv) Tutor:

− 6, Microbiology − 3, Forensic Medicine − 3, Community

Medicine -3.

v) Statistician cum

Asst. Professor:1

(b) The shortage of Resident 87.8% (i.e. 101 out of 115) as under:-

Sr. Resident :25 General Medicine -4, Paediatrics -3, General Surgery -2,

Orthopaedics – 2, ENT- 1, OB. & Gyn. – 3, Anaesthesiology

– 6, Radio-diagnosis - 4.

Jr. Resident: 76 General Medicine -18, Paediatrics -9, TB&chest -2,

Skin&VD- 2, Psychiatry – 3, General Surgery – 18,

Orthopaedics -9, ENT -3, Opthalmology -3, OB&Gyn -9.

#### 2. Clinical material is inadequate as under:-

	Day of inspection
	Observation of the Inspection team
O.P.D. attendance	760
	30
Casualty attendance	
Bed occupancy%	40%
Operative work	
Number of normal deliveries	Nil
Number of caesarian Sections	01
Radiological Investigations	
	120
X-ray	40

Ultrasonography	-
Special Investigations	
	03
C.T. Scan	
<u>Laboratory Investigations</u>	
	486
Biochemistry	59
Microbiology	33
Serology	06
Parasitology	254
Haematology	08
Histopathology	09
Cytopathology	

**<u>Remarks</u>**: Clinical Material in respect of OPD attendance, bed occupancy, operative work, radiological and lab investigations was low on the day of inspection.

## 3. <u>Health Center</u>:

- At R.H.T.C.: Seminar cum lecture theatre is not available. A.V. aids are not available.
- At U.H.C: No deliveries are conducted at U.H.C.
- 4. <u>Residential Quarters</u>: Inadequate residential quarters are available for non-teaching and class IV staff (12).
- 5. In the department of Anatomy, the ratio of non-medical staff is 57%.
- 6. In the department of Physiology, the ratio of non-medical staff is 83%.
- 7. In the department of Microbiology, the ratio of non-medical staff is 40%.
- 8. ICU: surgical ICU is under renovation.
- 9. <u>Radiological facilities</u>: The number of static x-ray units (4) and mobile x-ray units (1) are not as per MCI norms.
- 10. Other deficiencies/remarks in the main report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to renew the permission for admission of 5<sup>th</sup> batch of MBBS students for the academic year 2010-2011 at Sri Manakula Vinayagar Medical College & Hospital, Pondicherry.

## 20. Extension of services of Dr. Kamlesh Kohli as Whole Time Inspector.

Read: The matter with regard to extension of services of Dr. Kamlesh Kohli as Whole Time Inspector.

The members of the Executive Committee of the Council decided to extend the services of Dr. Kamlesh Kohli as Whole-Time Inspector of the Council for a further period of one year w.e.f. 31.12.2009.

# 21. <u>Increase in MBBS seats from 130 to 150 at Sree Siddharta Medical College,</u> Tumkur, Karnataka.

Read: The Council Inspectors report ( $9^{th}$  &  $10^{th}$  December 2009) for grant of letter of intent for Increase of MBBS seats from 130 to 150 at Sree Siddharta Medical College, Tumkur, Karnataka.

The members of the Executive Committee of the Council considered the Council Inspectors report (9<sup>th</sup> & 10<sup>th</sup> December 2009) and noted the following:

- 1. (a) The shortage of Residents is 24.05% as under:-
  - (i) Sr. Resident 09 (Medicine-1, TB & Chest 1, Radiology-2, Anaesthesia-3, & OBG-2)
  - (ii) Jr. Resident 10 (TB & Chest-2, Skin & VD 2, Psychiatry-2, Pediatric-1, Surgery-2, Orthopaedics-1)
- 2. Residential Quarters: Number of residential quarters for teaching and non-teaching staff is inadequate.
- 3. There is not hostel for female resident doctors.
- 4. The hostel accommodation for interns is inadequate.
- 5. In O.P.D. no separate registration counter for male and female patients, senior citizens, handicaps etc.
- 6. Each ward is not having duty doctor room, nurse duty room, pantry, treatment/procedure room, side laboratory & teaching area. In some wards nursing station is common for few wards & outside the ward.
- 7. Radiological facilities: Number of static x-ray units and mobile x-rays are not as per MCI norms.
- 8. Kitchen: there is no provision to supply special diet as recommended by the physician. Services of dietician are not available.
- 9. Area of the Common room for boys and girls is not as per requirement.
- 10. In Central Library, total area available is 1700 sq. mt. as against the requirement of 2400 sq. mt.
- 11. In the department of Anatomy, Physiology, Biochemistry, Pathology, Microbiology, Forensic Medicine & Community Medicine, each student's practical laboratory is having 75 workplace as against the requirement of 90 workplace each.
- 12. All the hostels reading room is non-AC.
- 13. Other deficiencies/remarks in the main report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to grant of letter of intent for Increase in MBBS seats from 130 to 150 at Sree Siddharta Medical College, Tumkur, Karnataka.

## 22. <u>Establishment of new medical college at Chennai, Tamil Nadu, by Tagore</u> Educational Trust, Tamil Nadu.

Read: The inspection report (9<sup>th</sup> & 10<sup>th</sup> December 2009) for establishment of new medical college at Chennai, Tamil Nadu, by Tagore Educational Trust, Tamil Nadu.

The members of the Executive Committee of the Council considered the Council Inspectors report  $(9^{th} \& 10^{th} December 2009)$  and noted the following:

- 1. (a) The shortage of teaching faculty is 45.45 % (shortage of 5 out of 11)
  - i) Professor Ni
  - ii) Associate Professor 2 (1 Anatomy, 1 Biochemistry)

- iii) Assistant Professor
- Nil

iv) Tutor

3 (1 Anatomy, 2 Physiology)

## 2. The Clinical material is inadequate as under:

	Daily A	Average	Day of Ins	
O.P.D. attendance	60	07		510
Casualty attendance	2	.9		31
Number of admissions / discharge	49	/40	49	9/40
Bed occupancy%	71	%	6	9%
Operative work  Number of major surgical operations  Number of minor surgical operations  Number of normal deliveries  Number of caesarian Sections	1	5 9 1 1		3 23 1 0
Radiological Investigations  X-ray Ultrasonography Special Investigations  C.T. Scan	O.P. 49 5 1 0	I.P. 21 1 1 0	O.P. 55 2 1 0	I.P. 16 0 0 0
<u>Laboratory Investigations</u>				
Biochemistry Microbiology Serology Parasitology Haematology Histopathology Cytopathology Others	161 42 12 12 162 1 2	123 21 7 10 126 3 1	179 46 15 12 181 1	132 27 8 7 137 2 0

- 3. Registration and Medical Record Section is not available.
- 4. Teaching areas are not available in OPD's.
- 5. No audiometry room is available in OPD
- 6. Wards: there is no seminar hall in the major department
- 7. No audio-visual aids and teaching facilities are provided in the teaching areas.
- 8. Medical education unit, statistical unit and college council are not established.
- 9. Buildings: The Medical College occupies a G+1 storied building. The hospital is located in a separate G+2 storied building. OPD's are located on the ground floor of the Hospital building.

A make shift arrangement on the day of inspection of Medical College Building is as follows:

College Building G+1

GF – Anatomy Dept, Biochemistry Dept., Dean office,

Administrative office, space for College Council, Central Lab, ICU General Medicine, Orthopaedic and Paediatric Wards.

FF – Central Library, Physiology Dept.

- 10. Anatomy department: There is no cooling cabinet, embalming machine and band saw. Students lockers are not available. Museum and catalogues are not available. Department library cum seminary room is not available.
- 11. Physiology department: No departmental library cum seminar room is available.
- 12. Biochemistry department: No departmental library cum seminar room is available.
- 13. Para clinical and clinical departments are not established.
- 14. Common room for boys and girls are not available.
- 15. Animal house is not available.
- 16. Sports and recreation facilities are not available.
- 17. Doctor duty room, nurses station, nurses duty room, pantry examination room, procedure room and side labs are not available in the wards.
- 18. Hostels are not available.
- 19. Labour room: Septic labour room and eclamsia room are not available.
- 20. Radiological facilities: Facilities for special investigations are not available. Protective measures as per BARC specification are not provided.
- 21. Blood bank is not available.
- 22. The Community Medicine department is not available.
- 23. Medler facilities are not available.
- 24. Other deficiencies/remarks in the main report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to issue letter of intent for Establishment of New Medical College at Chennai, Tamil Nadu by Tagore Educational Trust, Tamil Nadu.

# 23. <u>Inspection of Maharaja Agarsen Medical College, Agroha, Hissar to verify the teaching faculty, resident, clinical material, hostels and other infrastructural facilities.</u>

Read: The compliance verification inspection report (09<sup>th</sup> December 2009) along with Council Inspectors report (19<sup>th</sup> & 20<sup>th</sup> August,2009) of Maharaja Agarsen Medical College, Agroha, Hissar with regard to verify the teaching faculty, resident, clinical material, hostels and other infrastructural facilities.

The members of the Executive Committee of the Council considered the compliance verification inspection report (9<sup>th</sup> December 2009) along with Council Inspectors report (19<sup>th</sup> & 20<sup>th</sup> August,2009) and decided that the Council should process the applications for starting of postgraduate courses at Maharaja Agarsen Medical College, Agroha, Hissar for further necessary action.

# 24. Applications received from the Central Government with regard to Establishment of new medical colleges u/s 10(A) of the IMC Act, 1956 – Request for conducting the combined inspection of LOI & LOP – Reg.

Read : The requests of the proposed medical colleges for conducting the combined inspection of LOI & LOP.

The members of the Executive Committee of the Council observed that the following applications have been received from the Central Government, Ministry of Health & Family Welfare with regard to Establishment of New Medical Colleges to be established at various places in the country u/s 10A of the IMC Act,1956.

It was further observed that after scrutiny of the applications, the Council office had requested the concerned authorities to submit the Standard Inspection Forms and Declaration Forms so that Council can carry out the inspections of the proposed medical colleges as per time schedule prescribed in the Establishment of New Medical College Regulations, 1999. Now, the Council office has received requests from the following proposed medical colleges for conducting combine inspection of LOI & LOP:-

S.No.	Name of the College	Remarks
1.	Establishment of New Medical College at Valsad,	The Dean i/c, Govt. Med. College
	Gujarat By Gujarat Medical Education and	vide letter dated 29.10.2009 has
	Research Society, Gujarat.	requested to this Council to conduct
		the LOP inspection in March 2010.
2.	Establishment of New Medical College at Sola,	The Dean, New Medical College,
	Ahmedabad, Gujarat By Gujarat Medical	Sola, Ahemedabad vide letter dated
	Education and Research Society, Gujarat.	30.10.2009 has requested to this
		Council to conduct the LOP
		inspection in March-April 2010.
3.	Establishment of New Medical College at	The Dean, GCS Medical College,
	Ahmedabad, Gujarat By Gujarat Cancer Society,	Ahemedabad vide letter dated
	Gujarat.	29.10.2009 has requested to this
		Council to conduct the LOI and LOP
		inspection together.
4.	Establishment of New Medical College at Dharpur,	The Dean, Medical College, Patan
	Patan, Gujarat By Gujarat Medical Education and	vide letter dated 03.12.2009 has
	Research Society, Gujarat.	requested to this Council to conduct
		the LOI & LOP inspection in April 2010.
	Establishment of New Medical College of	
5.	Establishment of New Medical College at	The Dean, Medical College, Gotri, Vadodra vide letter dated
	Vadodara, Gujarat By Gujarat By Gujarat Medical Education and Research Society, Gujarat	29.10.2009 has requested to this
	(Government of Gujarat).	Council to conduct the LOP
	(Government of Gujarat).	inspection in March 2010.
6.	Establishment of New Medical College at	The Chairperson, Rouckmoni
0.	Trivendrum, Kerala By Rouckmoni Memorial	Memorial Charitable Educational &
	Charitable Educational & Health Trust,	Health Trust, Trivandrum, Kerala
	Trivandrum, Kerala.	vide letter dated 10.11.2009 has
		requested to this Council to conduct
		the LOI & LOP inspection in April
		2010.
7.	Establishment of New Medical College at Gajroula,	The Secretary, Shri Bankey Bihari
	J.P. Nagar, Uttar Pradesh by Shri Bankey Bihari	Educational & Welfare Trust,
	Educational & Welfare Trust, Meerut, Uttar	Meerut vide letter dated 30.10.2009
	Pradesh	has requested to this Council to
		conduct the LOP inspection in April
		2010.
8.	Establishment of New Medical College at Kalyani,	The Principal, College of Medicine
	West Bengal, By West Bengal University of	and JNM Hospital WBUHS,
	Health Sciences, Kolkata, West Bengal.	Kolkata vide letter dated 22.10.2009
		has requested to this Council to
		conduct the LOP inspection in
		March 2010.

The members of the Executive Committee of the Council decided to carry out the combined inspection of LOI & LOP of the above mentioned medical colleges.

# 25. Admissions of excess students under Management quota at AMC MET Medical College, Ahmedbad for the academic year 2009-10.

Read: The matter with regard to the excess admission of students under Management quota at AMC MET Medical College, Ahmedbad for the academic year 2009-10.

The members of the Executive Committee of the Council noted the list of students received from the Dean, AMC MET Medical College, Ahmedabad vide letter dated 09.11.2009 and observed that AMC MET Medical College, Ahmedabad has admitted excess students under Management quota for the academic year 2009-10 as under:-

Name	of the	Sanctioned	Ratio fixed by	Students	Students	No. of
College		Intake for	the State	admitted	admitted	Excess
		the	Government	under	under	Admission
		Academic	for the year	Government	Management	under
		Year 2009-	2009-10	Quota	Quota	Management
		10				quota
AMC	MET	150	25:75	Nil	150	112
Medical	College,					
Ahmedabad						

The members of the Executive Committee of the Council after detailed deliberations decided that suitable communication be sent to the concerned State Govt. for the said medical college where the admissions have been made by them in excess for the academic year 2009-10 by calling upon them to correspondingly reduce the admissions in Management quota for said college for the academic year 2010-2011 and for corresponding increased allocation of the free seat candidates by the concerned State Govt. for the academic year 2010-2011 so as to set-off the undue advantage gained by said medical college by making excess admissions in the management quota in the academic year 2009-10.

## 26. <u>KMCT Medical College, Kozhikode -Renewal of permission for admission of 3rd batch of students for the academic session 2010-2011.</u>

Read: The Council Inspectors report (3<sup>rd</sup> & 4<sup>th</sup> December, 2009) for renewal of permission for admission of 3<sup>rd</sup> batch of students for the academic session 2010-2011 at KMCT Medical College, Kozhikode.

The members of the Executive Committee of the Council considered the Council Inspectors report ( $3^{rd}$  &  $4^{th}$  December 2009 ) and noted the following :

- 1. The shortage of teaching staff required at present stage is as under:-
  - (a) The shortage of teaching faculty is 74.1% (i.e. 83 out of 112) as under:-

Sl.No.	Designation	Number	Department
i)	Professor	: 12	Biochemistry -1, Pharmacology -1, Pathology -1, Microbiology -1, Forensic Medicine-1, Community Medicine -1, Paediatrics -1, Orthopaedics -1, ENT-1, Ophthalmology -1, Obst. & Gynae1 & Radio-diagnosis-1
ii)	Associate Professor	: 18	Biochemistry -1, Pathology -2, Microbiology -1, Forensic Medicine -1, Community Medicine -2, General Medicine -3, Paediatrics -1, General Surgery -3, Orthopaedics -1, Anaesthesia - 2, Radio – diagnosis -1
iii)	Asst.Professor	: 26	Anatomy -1, Physiology -1, Pharmacology -1, Pathology -1, Microbiology -2, Forensic

			Medicine -1, Community Medicine -5, Statistician -1, General Medicine -1, Paediatrics -1, Psychiatry -1, General Surgery -1, Orthopaedics -1, Obst. & Gynae4, Anaesthesia -2 & Radiology-2
Iv)	Tutor	: 27	Anatomy -4, Physiology -4, Biochemistry -3, Pharmacology -2, Pathology -5, Microbiology -3, Forensic Medicine -2, Community Medicine -4

## (b) The shortage of Residents is 98.76% (i.e. 80 out of 81) as under :-

Sl.No.	Designation	Number	Department
i)	Senior Resident	: 26	General Medicine -4, Paediatrics - 2, TB & Chest - 1, Skin & VD -1, Psychiatry - 1, General Surgery - 4, Orthopaedics -2, ENT -1, Ophthalmology -1, Obst. & Gynae1, Anaesthesia -5, Radio-diagnosis -3
ii)	Junior Resident	: 54	General Medicine -12, Paediatrics -6, TB & Chest - 2, Skin & VD -2, Psychiatry - 2, General Surgery - 12, Orthopaedics -6, ENT -3, Ophthalmology -3, Obst. & Gynae6

## 2. Clinical Material is grossly inadequate as under:-

	Daily Average	Day of Inspection
O.P.D. attendance	300-320	380
Casualty attendance	20	30
Number of admissions / discharge	20/25	12/8
Bed occupancy%	30%	16%
Operative work Number of major surgical operations	1-2 1-2	1 1
Number of minor surgical operations  Number of normal deliveries	1-2 1-2 0-1	2 Nil
Number of caesarian Sections	0-1	IVII
Radiological Investigations		
X-ray	15-20	21
Ultrasonography	2-4	Nil
Special Investigations	1-2	Nil
C.T. Scan	Not available	Not available
<u>Laboratory Investigations</u>		
Biochemistry	100-120	73
Microbiology Serology	15-20	07
Parasitology Haematology	50-70	39
Histopathology	Not available	Not available
Cytopathology	Not available	Not available
Others	30-50	23

#### Remarks:

• Clinical material is grossly inadequate in terms of OPD attendance, casualty attendance, number of admissions/charges, bed occupancy, operative work, radiological investigations and laboratory investigations for daily average as well as on the day of inspection.

- The records available in the computer are being forged and do not tally with the records available in the OPD and IPD Registers.
- There were 9 patients in the Obst. & Gynae. ward on the day of inspection whereas the entries of 38 fake patients was done in the IP register showing the total entry of 47 patients.
- No facilities for conducting histopathology and cytopathology tests are available in the central lab.
- 3. The lecture theatres in the college block are under construction. Presently only one functional lecture theatre is available in the hospital, which is being used for teaching of pre-clinical, para-clinical and clinical subjects.
  - All lecture theatres are non-A/C.
- 4. Examination Hall: Under construction. Presently one examination hall in the Hospital block is available with the capacity of 100 seats as against the requirement of 500 seats at the present stage, which is not as per MCI norms.
- 5. Animal house is not functional.
- 6. Medlar facilities are not available.
- 7. Staff available in the library is inadequate. Number of books available in the library are 3378 as against the requirement of 4200. Number of Indian journals available in the library are 13 as against the required of 42. The Foreign Journals available in the Library are up to year 2008.
- 8. <u>Health Centres</u>: R.H.T.C. and U.H.C. is not available.
- 9. Hostel accommodation is inadequate for UG boys, resident doctors and nursing staff.

There is no mess available in any hostels. The Hospital canteen is being used by the patients as well as UG students, resident doctors, faculty, non teaching staff as well as nursing staff. The hospital canteen is housed in a temporary building with asbestos sheet roof. The food is cooked by using wood and gas.

Nurses hostel is also being used by senior faculty.

- 10. Residential Quarters: Total 15 quarters are available within the campus (as against the requirement of 23) for the teaching faculty. The number of quarters available for non-teaching staff is 12 (as against the requirement of 36).
- 11. Sports and recreation facilities are not available at the present stage.
- 12. Distribution of beds is as under:

Speciality	Required Beds/Units	Present Beds/Units	Deficiency if any
Medicine & Allied Specialities			
General Medicine	93/3	48/2	45/1

	400/17	231/9	169/8
Total			
Gynaecology	56/2	Obstretrics)	23/1
Obstetrics & ANC	22	for Gynae &	
	34	33/1 (Combined	23/1
Obstetrics & Gynaecology			
Total			
ENT	175/7	Ophalmology) 118/4	57/3
Ophthalmology	16/1	for ENT &	6/1
Orthopaedics	16/1	26/1 (Combined	20/1
General Surgery	50/2	30/1	31/1
	93/3	62/2	
Surgery & Allied Specialities			
Total	169/8	80/4	89/4
Psychiatry	7/1	Nil	7/1
Skin & VD	7/1	6/1	1/Nil
TB & Chest	12/1	Nil	12/1
Paediatrics	50/2	26/1	24/1

- There is deficiency of 169 teaching beds and 8 clinical units.
- The ENT and Ophthalmology beds have been placed together in the same ward for both male and female patients.
- 13. O.P.D.- Audiometry room was locked. Teaching area in various OPDs are very small. Seating capacity varies between 6-8.
- 14. Wards: There is no side lab, pantry available in any ward.
- 15. MRD partially computerized.
- 16. Central casualty service: Only 4 functional beds are available as the casualty is under renovation. The emergency OT is being used as the major OT since all the 5 major OTs are under construction.
- 17. Operation theatre: Only one OT is functional (E-OT), as the OT block with 5 operation theatres is under renovation.
- 18. Intensive care: There is no ICCU, Burns ICU and Gynae. ICU. The number of beds available in MICU, SICU and PICU/NICU are not as per MCI norms.
- 19. Labour room: There is only one functional labour room. The septic labour room and eclamsia room are under renovation.
- 20. Radiological facilities:
  - One static X-Ray unit of 500mA was out of order hence non functional.
  - There are only 2 mobile X-ray units as against the requirement of 3.
  - There is only 1 functional static X-Ray unit as against the requirement of 4 static
  - Two ultrasound are available as against the requirement of 3.
  - Inadequate facilities and workload is available in the department of radiology.
- 21. Central sterilization department:
  - There is no CSSD available in the hospital.

22. Central laundry: Central mechanized laundry not available at the present stage. It is under renovation.

#### 23. Kitchen not available.

#### 24. In Anatomy Department:

- MRI, CT and X-rays are not displayed.
- No catalogues are available.
- Research lab. not available.

## 25. In Biochemistry Department:

- Research laboratory with nil equipment is available.
- Inadequate number of seats in the departmental library-cum-seminar room is available.

## 26. In Pharmacology Department:

- Labs are non functional, Unfurnished offices are available for teaching and nonteaching staff.
- Plumbing work is still to be done.
- No electricity available in the department.
- Inadequate specimens are available in the museum.

## 27. In Pathology Department:

- Labs are non functional, Unfurnished offices are available for teaching and non-teaching staff.
- Plumbing work is still to be done.
- No electricity available in the department.
- No specimens are available in the museum.

## 28. In Microbiology Department:

- No faculty/tutors available in the department
- Labs are non functional, Unfurnished offices are available for teaching and non-teaching staff.
- Plumbing work is still to be done.
- No electricity available in the department.
- No specimens are available in the museum.

## 29. In Forensic Medicine Department:

- No faculty/tutors available in the department
- Labs are non functional, Unfurnished offices are available for teaching and non-teaching staff.
- Plumbing work is still to be done.
- No electricity available in the department.
- No specimens are available in the museum.

## 30. In Community Medicine Department:

- No faculty/tutors available in the department
- Labs are non functional, Unfurnished offices are available for teaching and non-teaching staff.
- Plumbing work is still to be done.
- No electricity available in the department.
- No specimens are available in the museum.
- RHTC and UHC are not available.
- 31. Website has been developed which does not incorporate the details as per MCI requirements.

## 32. Other deficiencies/remarks in the main report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to renew the permission for admission of 3<sup>rd</sup> batch of MBBS students for the academic year 2010-2011 at KMCT Medical College, Kozhikode.

## 27. <u>Chettinad Hospital & Research Institute, Tamil Nadu - Renewal of permission</u> for admission of 5th batch of students for the academic session 2010-2011.

Read: The Council Inspectors report  $(11^{th} \& 12^{th})$  December, 2009) for renewal of permission for admission of  $5^{th}$  batch of students for the academic session 2010-2011 at Chettinad Hospital & Research Institute, Tamil Nadu.

The members of the Executive Committee of the Council considered the Council Inspectors report  $(11^{th}~\&~12^{th}~December~2009~)$  and noted the following:-

## 1. The Shortage of teaching staff required at present stage is as under:

a		Teaching Faculty	63 out of 152	41.44 %	
	i.	Professor	7	Biochem-1, Forensic-1, Ped-1, Psych-1, Opth-1, Radiology-1, Dentistry-1	
	ii.	Associate Prof.	23	Anatomy-1, Pharma-2, Patho-3 Micro-2, Forensic-1, PSM-1, Med-2, Ped- 1, TB-1, Surg-2, Ortho-2, Anaesthesia-2, Radiology-2, Dentistry-1.	
	iii.	Assistant Professor	15	Anatomy-1, Pharma-1, Patho-1, Forensic-1, PSM-2, Derma-1, Psych-1, Surg-1, Ortho-2, Anaesthesia-1, Radiology-2, Dentistry-1	
	iv.	Tutor	18	Anatomy-1, Physio-2, Biochem-3, Pharma-1, Patho-3, Micro-2, Forensic—2, PSM-4	

b	Residents		72 of 115	62.60%
	i.	Sr. Residents	18	Med-3, Ped-2, Surg-2, Ortho-2, ENT-1, OBG-2, Anaesthesia-4, Radiology-2
	ii.	Jr. Residents	54	Med-12, Ped-8, TB-1, Derma-1, Psych-3, Surg-12, Ortho-6, ENT-1, Opth-2, OBG-8

The following Teaching Faculty has not been considered because of the reasons mentioned below:-

S. No.	Name	Department	Designation	Reason for not considering	
1.	Dr. Ramesh Rao K	Pathology	Professor	Does not have required	
				teaching experience	
2.	Dr. Priyadarshini	Microbiology	Assoc. Prof.	Does not have required	
	Shanmugam			teaching experience	
3.	Dr. Kangasarathy	Orthopedics	Asst. Prof.	Does not have required	
		_		teaching experience	

## 2. Clinical Material:

Clinical Material Available	Daily Average 1-6-09 to 30-11-09	Day of Inspection 11-12-2009
Bed Occupancy %	84%	60%

Оре	erative work	OP	IP	OP	IP
1.	Normal deliveries	-	2	-	-
2.	Caesarian Sections	-	1	-	1
La	aboratory Investigations				
1.	Microbiology	54	66	43	46
2.	Serology	82	78	79	72
3.	Parasitology	-	7	-	8
4.	Histopathology	-	7	-	8
5.	Cytopathology	-	6	-	9
6.	Others	8	22	-	32
	MRI	2	7	-	7

3. The Dean is absent for both days during inspection. Dr. Ganeshan, Professor of Surgery has been working as In Charge Dean in absence of Dr. Ravindran.

## 4. Lecture theatres:

- One lecture hall is under construction. There is deficiency of one lecture hall.
- One lecture theatre in the hospital is of level type which is not as per MCI norms. Plastic chairs have been placed in the lecture theatre.
- Lecture halls do not have facility for conversion in to E-class / virtual class for teaching.

### 5. Auditorium Cum Examination Hall:

- Auditorium : It is under construction.
- Examination Hall: At present both the Auditorium and Examination hall are separate. This requires to be reorganized as per requirement.
- 6. Animal House: There is no facility for demonstrating Experimental work on animals by Computer aided education.
- 7. Central Library: Library should be made air-conditioned. Medlar facility and Skill Lab are not available.
  - Total seating capacity requires to be increased.
  - Number of books requires to be increased as per norms.
  - Number of computer requires to be increased as per norms.

#### 8. Hostel:

• AC visitor room is not available in the hostel. Internet facility is not available in the study room.

### 9. Distribution of beds:

• Out of these bed about 150 beds on third floor in newly constructed eight wards are not fully commissioned. Physically cots are provided, however other infrastructure in the wards are to be made complete. The patient utility and Nursing infrastructure is to be provided. Some finishing work in under pipeline.

## 10. In Wards:

- Accommodation exceeds 30 patients in some wards which required to be reorganized as per requirement.
- Distance between two beds is less than 1.5 meters in each ward. This requires to be reorganized as per norms.

- 11. Registration and Medical Record Section:
  - The qualified Medical Record Officer is not available.
  - Medical Statistics is not published.
- 12. Radiological Facility: Only 2 mobile x-ray units (50 of 100 mA) are available which is not as per MCI norms.
- 13. In Central library:
  - Space to be increased up to 1600 sq. Mts.:
  - AC in computer room is not available.
  - Skill lab requires to be provided.
  - College requires to adopt information technology fully in teaching Medicine
  - Provision for e-library also be upgraded.
  - Number of books requires to be increased to 11000 for this stage.
  - Total seating capacity requires to be increased.
  - Number of books requires t be increases as per norms.
  - Number of computer requires to be increases as per norms.
- 14. Pharmaco-Vigilance committee is not constituted.
- 15. Central Research Laboratory is not available.
- 16. Computers: Computer and Printer Facility not available in the Dean and Medical Superintendent office as well as each department
- 17. Web Site: Website needs to be updated in the first week of every month. Details to be provided as per requirement.

Sr.	Detail Information	Provided or not
No.		
1.	Staff: Teaching & Non Teaching	Partly
2.	Sanctioned Intake for UG & PG	
3.	List of Students admitted merit wise category wise	
	(UG & PG) for current and previous year.	
4.	Research Publication during last one year.	
5.	CME, Conference, academic Activity conducted by	
	institution.	Not provided
6.	Awards, Achievement received by Student or faculty	
7.	Affiliated University, VC and Registrar	
8.	Results of all exams of Last one year.	
9.	Status of recognition of all courses.	
10.	Clinical Material in the Hospitals	

- 18. Para clinical department:
  - Forensic Medicine: there is no facility for demonstration experimental.
- 19. Other deficiencies / remarks in the main report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to renew the permission for admission of 5<sup>th</sup> batch of MBBS students for the academic year 2010-2011 at Chettinad Hospital & Research Institute, Tamil Nadu.

## 28. <u>Increase in MBBS seats from 65 to 100 at Indira Gandhi Medical College, Shimla, Himachal Pradesh.</u>

Read: The Council Inspectors report (09<sup>th</sup> & 10<sup>th</sup> December 2009) for grant of letter of intent for Increase of MBBS seats from 65 to 100 at Indira Gandhi Medical College, Shimla, Himachal Pradesh.

The Executive Committee of the Council considered the Council Inspectors Report (9<sup>th</sup> & 10<sup>th</sup> December, 2009) and decided to recommend to the Central Govt. to issue Letter of Intent for increase in MBBS seats from 65 to 100 at Indira Gandhi Medical College, Shimla, Himachal Pradesh for the academic session 2010-11.

## 29. <u>Increase in MBBS seats from 50 to 150 at Sikkim Manipal Institute of Medical</u> Sciences, Gangtok, Sikkim.

Read: The Council Inspectors report (09<sup>th</sup> & 10<sup>th</sup> December 2009) for grant of letter of intent for Increase of MBBS seats from 50 to 150 at Sikkim Manipal Institute of Medical Sciences, Gangtok, Sikkim.

The members of the Executive Committee of the Council considered the Council Inspectors report (9<sup>th</sup> & 10<sup>th</sup> December 2009) and noted the following:-

- 1. The shortage of teaching staff required at present stage is as under:-
- (a) The shortage of teaching faculty is 46.5% (i.e. 47 out of 101) as under :-

(i) Professor : 09 (Anatomy -1, Physiology -1, General Medicine -1, Skin & VD -1, Orthopaedics -1, ENT -1, Obst. & Gynae. -1, Anaesthesia -1 & Dentistry -1)

(ii) Associate Professor : 15 (Anatomy -2, Physiology -2, Biochemistry -1, Forensic Medicine -1, Community Medicine -1, General Medicine

-2, General Surgery -2, Orthopaedics -1, Obst. & Gynae.

-1, Anaesthesia -1, Radio-diagnosis-1)

(iii) Assistant Professor : 13 (Anatomy -2, Physiology -2, Pathology -1, Microbiology

-1, Forensic Medicine -1, Community Medicine -3, TB &

Chest -1, Psychiatry -1 & Obst. & Gyane. -1)

(iv) Tutor : 10 (Anatomy -2, Physiology -3, Pathology -1, Microbiology

-2 & Community Medicine -2)

(b) The shortage of Residents is 47.2% (35 out of 74) as under :-

(i) Sr. Resident : 10 (Paediatrics -1, Skin & VD -1, Psychiatry -1, General

Surgery -2, Orthopaedics -1, Anaesthesia -2 & Radio-

diagnosis -2)

(ii) Jr. Resident : 25 (General Medicine -2, Paediatrics -4, TB & Chest -2,

Skin & VD -2, Psychiatry -3, General Surgery -3,

Orthopaedics -6, ENT -2 & Ophthalmology -1)

## 2. Clinical Material is grossly inadequate as under:-

	Daily Average	Day of Inspection
O.P.D. attendance	300-350	320
	15- 20	11
Casualty attendance		
Number of admissions / discharge	28/21	8/3
Bed occupancy%	20-25 %	21%
Operative work	1-2	1
Number of major surgical operations	1-2	1

Number of miner surgical energions	1-2	1
Number of minor surgical operations		1
Number of normal deliveries	0-1	-
Number of caesarian Sections		
Radiological Investigations		
	35-40	25
X-ray	20-22	14
Ultrasonography	0-1	-
Special Investigations	6-8	6
C.T. Scan		
Laboratory Investigations		
	150-200	136
Biochemistry	25-30	22
Microbiology	15-20	15
Serology	2-4	2
Parasitology	17-80	93
Haematology	2-4	1
Histopathology	1-2	1
Cytopathology	-	-
Others		

• Clinical material is grossly inadequate in terms of OPD attendance, casualty attendance, number of admissions/discharges, bed occupancy, operative work, radiological investigations as well as laboratory investigations.

## 3. <u>Health centres</u>:

## In R.H.T.C.:

- RHTC is under the control of the Ministry of Health & F.W. Govt. of Sikkim.
- No lecturer cum medical officer having M.D.{P.S.M.} is available.

### In U.H.C.:

- UHC is located in a private building which has been taken by the institution on rental basis.
- No lecturer cum medical office having M.D.{P.S.M.} is posted.
- Facilities for diagnostic investigations and minor Surgery are not available.

## 4. Residential Quarters:

• There are no residential quarters available for the non-teaching staff.

## 5. Teaching Hospital:

- Available teaching beds are 479 as against the requirement of 550 beds.
- 6. Dr. B.K.Kanungo is the Medical Superintendent. He is M.D. (O.B.G) and has 3 years of administrative experience. Not eligible
- 7. Clinical Laboratories: Work load in the central clinical laboratories is low.
- 8. Radiological facilities:
  - Number of static x-ray unit available are 2 as against the requirement of 5.
  - Number of mobile x-ray unit available are 2 as against the requirement of 4.
  - Number of ultrasound machine available are 2 as against the requirement of 3.
  - Inadequate facilities and workload are available in the Department of Radiology.
- 9. Central sterilization department: Nil bowl sterilizer, Nil Glove inspection machine and Nil instrument washing machine in CSSD. There is low workload in the CSSD Department.
- 10. Other deficiencies/remarks in the main report.

In view of the above, the members of the Executive Committee of the Council decided to recommend to the Central Govt. not to grant of letter of intent for increase in MBBS seats from 50 to 150 at Sikkim Manipal Institute of Medical Sciences, Gangtok, Sikkim.

## 30. <u>Establishment of new medical college at Dehradun, Uttarakhand by Government of Uttarakhand.</u>

Read: The inspection report (9th & 10th December 2009) for grant of letter of intent for establishment of new medical college at Dehradun, Uttarakhand by Government of Uttarakhand.

The members of the Executive Committee of the Council considered the Council Inspectors report (9<sup>th</sup> & 10<sup>th</sup> December 2009) and noted the following:

- 1. Plot of Land: The proposed college does not own and is not in possession of a unitary, contiguous plot of land. Regarding plot size of existing Doon Male Hospital (Marked 1), Doon Female Hospital (Marked 2) and residential area (Marked 4) no document has been provided. The area of Pt. Deen Dayal Upadhaya Hospital (Marked 3) located about 3 ½ Km.away from Doon Hospital is claimed to have 3 acres of land but no document in support thereof has been provided. Area (Marked 5), 1 acre of vacant land adjacent to Doon Female Hospital is said to be under the possession of the Hospital but no document to show the size and the possession has been provided. The areas Marked 6, 7 & 9(0.33 acre, 0.86 acre and 7.22 acre respectively) only the Govt. Order for permission to transfer the land is available but the actual transfer of land and possession has not been taken as yet. The area Marked -8 is Gandhi Shatabdi Eye Hospital about 1 Km from Doon Hospital, is under construction. No land document for ownership and size of land has been provided for the same.
- 2. No college building is available.
- 3. No building plan has been approved by competent authority as yet.
- 4. Administrative block: Dean/Principal has not been appointed as yet and the college building including administrative block has not been constructed so far.
- 5. Distribution of beds is not as per MCI norms:-

Specialty	Required Beds/Units	Present Beds/Units	Deficiency (if any)
Medicine & Allied Specialities  General Medicine	80 30	74 16	Doon Male Hospital
Paediatrics TB & Chest	-	08 04	
Skin & VD	-	04	
Psychiatry	110	106	
Total			
Surgery & Allied Specialities			
General Surgery	90 30	61 48	Doon Male
Orthopaedics Ophthalmology ENT	10 10	03 08	Hospital

Total	140	120	
Obstetrics & Gynaecology Obstetrics & ANC Gynaecology	30 20	77	Doon Female Hospital.
Total	50	77	
Total	-	48	Pt. Deen Dayal Upadhaya Hospital (Medicine, Pediatrics, Surgery, Orthopedics)
<b>Grand Total</b>	300	351	

- 6. Pre-clinical departments including the teaching staff are not available.
- 7. Other deficiencies/remarks in the main report.

In view of the above, it has been found that the applicant has failed to fulfill the Clause A.1.1. of the "Minimum Requirements for 100 MBBS Admissions Annually Regulations, 1999", , as amended by "Minimum requirement for 100 MBBS Admissions Annually Regulations (Amendment), 2009 vide notification dated 8-7-2009 under the heading 'CAMPUS', which reads as under:-

"The medical college or medical institution shall be housed in a unitary campus of not less than 20 acres of land except in metropolitan and A class cities (Ahmedabad, Hyderabad, Pune, Bangalore and Kanpur). However, this may be relaxed in a place especially in Urban areas where the population is more then 25 lakhs, hilly areas, notified tribal areas, North Eastern States, Hill States and Union Territories of Andaman & Nicobar Islands, Daman & Diu & Dadra & Nagar Haveli, where the land shall not be in more than two pieces and the distance between the two pieces shall not be more then 10 kms. the hospital, college building including library and hostels for the students, interns, PGs/Residents and nurses shall be in one piece of land which shall not be less then 10 acres. Other facilities may be house in the other pieces of land. Proper landscaping should be done......"

The Executive Committee of the Council therefore, decided to return the application to the Central Government recommending disapproval of the scheme for establishment of New Medical College at Dehradun, Uttarakhand by Government of Uttarakhand u/s 10(A) of the IMC Act, 1956.

# 31. <u>Minimum Standard Requirements for the Medical College for 50/100/150 Admissions Annually Regulations, 1999 – Further proposed amendments in Clause A.1.1 and B.1.8 in the said Regulations.</u>

**Read :** The letter dated 11.12.2009 received from the Ministry of Health & Family Welfare, New Delhi with regard to Minimum Standard Requirements for the Medical College for 50/100/150 Admissions Annually Regulations, 1999 – Further proposed amendments in Clause A.1.1 and B.1.8 in the said Regulations.

The Members of the Executive Committee considered the Central Government letter dated 11.12.2009 along with the Minimum Standard Requirements for the Medical College for 50/100/150 Admissions Annually Regulations, 1999 and observed as under:-

## "In Schedule (I), Clause A.1.1

"The medical college or medical institution shall be housed in a unitary campus of not less than 20 acres of land except in metropolitan and A class cities (Ahmedabad, Hyderabad, Pune, Bangalore and Kanpur). However, this may be relaxed in a place especially in Urban areas where the population is more then 25 lakhs, hilly areas, notified tribal areas, North Eastern States, Hill States and Union Territories of Andaman & Nicobar Islands, Daman & Diu & Dadra & Nagar Haveli, where the land shall not be in more than two pieces and the distance between the two pieces shall not be more then 10 kms. the hospital, college building including library and hostels for the students, interns, PGs/Residents and nurses shall be in one piece of land which shall not be less then 10 acres. Other facilities may be house in the other pieces of land. Proper landscaping should be done.

However, in metropolitan cities and "A" class cities (Ahmedabad, Hyderabad, Pune, Bangalore and Kanpur), the permissible FAR/FSI would be the criterion for allowing the medical colleges provided that the total built up area required for adequate infrastructure including medical college, hospital hostels, residential quarters, and other infrastructure required a per Minimum Standard Requirement Regulations is made available in an area of not less than 10 acres based upon the permissible FAR/RSI allowed by the competent authorities."

## In Schedule (I), Clause B.1.8

"Indoor beds occupancy-Average occupancy of indoor beds shall be a minimum of 80%.

Provided that it shall be minimum 70% at the time of inception which shall be increased to 80% for subsequent annual renewals for a college having annual intake of 100 students in North Eastern States and Hill States."

Now, the Central Government, Ministry of Health & Family Welfare vide letter No. V.11012/1/2005-ME(P-I) dated 11.12.2009 has referred the Medical Council of India Notification No. MCI-34(41)/2009-Med/50076 dated 12.11.2009 and requested to make the following changes in the said notification:

٠...

- 1. In the Schedule (I), Clause A.1.1, in the fourth line of amended text of the notification, after the words "more than 25 lakhs", the words, "other than the nine cities mentioned in the Clause" may be added.
- 2. In the Schedule (I), Clause A.1.1., in the fourth/ fifth line of amended text of the notification, after the words "Dadra & Nagar Haveli", the words, "and Lakshadweep" may be added.
- 3. In the Schedule (I), Clause B.1.8, in the last line of amended text of the notification, after the words, "North Eastern States and Hill States", the words, "Notified Tribal Areas, Union Territories of Andaman & Nicobar Island, Daman & Diu, Dadra & Nagar Haveli and Lakshadweep", may be added."

The Ministry has requested to this Council to make the aforesaid additions in all the relevant places and regulations and Draft Notification may be sent to them for vetting."

In view of the above, the Executive Committee after due deliberations in the matter decided that the above said proposed amendments by the Central Government in Schedule I, Clause A.1.1 and Clause B.1.8 in the Minimum Standard Requirements for the Medical College for 50/100/150 Admissions Annually Regulations, 1999, may be accepted.

The Minutes of this item were read out and confirmed in the meeting itself and it was decided that the decision be sent to the members of the General Body of the Council by circulation immediately for consideration and sending their decision within 10 days.

## 32. To review the medical care arrangements for the Commonwealth Games 2010.

Read: The matter with regard to review the medical care arrangements for the Commonwealth Games 2010.

The members of the Executive Committee of the Council observed that a review meeting for the medical care arrangements for the Commonwealth Games – 2010 was organized under the Chairmanship of DGHS on 22<sup>nd</sup> October,2009. The Council office has received the minutes of the meeting from Dr. L. Swasticharan, CMO (EMR), Govt. of India, Ministry of Health & Family Welfare, DGHS. The following decisions were taken at the meeting:-

"....

After deliberations, the following were decided:-

- 1. Dr. RML Hospital and JPN Trauma Centre would immediately start work on strengthening/creating a 30 bed facility with ten intensive care beds for providing definitive care. They would factor in their financial requirements in their budget and place the requirement before appropriate authority.
- 2. Prof. M.C. Mishra, Chief, JPN Apex Trauma Centre and Dr. Ravindran, Director, EMR would visit Dr. RML Hospital to assess the plan of action of Dr. RML Hospital to create the required facility at their trauma centre.
- 3. All Central Government hospitals would strengthen facilities earmarked for mass casualty management and provide a copy of their updated disaster management plan to Organizing Committee and to Delhi Government.
- 4. Director, EMR would explore meeting expenditure for training doctors (identified for the definitive care, manning medical centers at training and competition venues and those to be involved for mass casualty management) in ATLS training programme from EMR budget.
- 5. The manpower requirement worked out to man the medical centers at competition and training venues attached to Central Government hospitals would be identified and names communicated to EMR division. The concerned Central Government hospitals would also identify a nodal officer for each training / competition venue.
- 6. The Organizing Committee would take a decision on the "field of play" teams and communicate the requirement with in 15 days.
- 7. Time line for procurement and Installation of equipments at medical centers would be five months for indigenous equipments and eight months for imported equipments. All institutions would adhere to this time line. The decision would be left to the individual hospitals (of the Central Government) whether to opt for the centralized procurement by Delhi Government or to procure of their own.
- 8. Delhi Government would furnish these medical centers (including medical furniture) This would ensure that all the Centers have a uniform appearance.

- 9. The First Aid Posts in different competition venues would be manned and equipped by Delhi Government.
- 10. Neither the hospitals in Delhi are equipped to manage CBRN disasters nor the time line permits to create such fully functional facilities. Organizing Committee and Delhi Government would reconsider this part of the action plan.
- 11. Director, EMR would put up a proposal to support the ATLS training programme run by JPN Apex Trauma Centre and Dr. RML Hospital.
- 12. The GNCT of Delhi (Health Department) would draw up the Standard Operating Procedures and share the same with all concerned.
- 13. A Committee comprising of Deputy Secretary (Hospitals), Ministry of Health and Family Welfare, Dr. J.C. Garg, Deputy Director(DM), representative of Government of Haryana and Dr. Mehdiratta, the representative of Organizing Committee would discuss all outstanding issues with IG, CRPF regarding medical care facilities at Kadarpur (CRPF camp) in Haryana for Large Bore Shooting event.
- 14. For the cycling event passing through NOIDA, it was decided that the State health Department would be requested to attend the next review meeting.
- 15. The Organizing Committee would provide name of doctors (with details in the prescribed proforma) requiring temporary registration at least eight weeks in advance to the Medical Council of India. MCI would explore the possibility of waiving of the registration fee for these doctors."

After perusing the minutes, the members of the Executive Committee decided that the chargeable registration fee in respect of grant of temporary registration to the doctors whose names would be provided to the Council with relevant details in the prescribed proforma by the Organizing Committee of the Commonwealth Games -2010 would be waived as a one time measure.

33. Amendment to Indian Medical Council (Professional Conduct, Etiquette and Ethics),2002 with reference to invoking a desired and health relationship between doctors and pharmaceutical and allied health sector industries towards preventing unscrupulous practices by doctors – Awareness regarding.

Read: The matter with regard to the amendment to Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations, 2002 with reference to invoking a desired and healthy relationship between doctors and pharmaceutical and allied health sector industries towards preventing unscrupulous practices by doctors.

The members of the Executive Committee observed that the Council at its meeting dated 18.11.2009 while accepting the recommendations of the Executive Committee meeting dated 17.11.2009 has proposed an amendment in Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations, 2002 with reference to invoking a desired and health relationship between doctors and pharmaceutical and allied health sector industries towards preventing unscrupulous practices by doctors, which has been notified vide notification dated 10.12.2009. It was therefore decided that in order to generate desired awareness amongst all concerned on this important issue, the notification should be given wide publicity through insertion of appropriate advertisement in leading English National Dailies all over the country by the Council.

It was further decided that the State Councils be requested to give wide publicity in their respective States by appropriately translating the concerned matter in the relevant vernacular language of the State for the information of all concerned in the State.

(Dr. Reena Nayyar) Deputy Secretary

New Delhi, dated the <u>15<sup>th</sup> December,2009</u>

<u>APPROVED</u>

(Dr. Ketan Desai) President