

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

**MEDICAL COUNCIL OF INDIA**

**EXECUTIVE COMMITTEE**

Minutes of the meeting of the Executive Committee held on 19<sup>th</sup> April,2003 at 11.00 a.m. in the Council office, Aiwan-E-Galib Marg, Kotla Road, New Delhi-110 002 which was also attended by the members of the Adhoc Committee as appointed by the Hon'ble Supreme Court vide its order dated 20.11.2002.

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**Present:**

Dr.P.C. Kesvankutty Nayar	President (Acting) (Dean, Govt. Medical College) Trivandrum
Padamshree Prof. P.N.Tandon	]Members ]Adhoc Committee
Padamshree Prof. N.Rangabashyam	]appointed by the ]Hon'ble Supreme Court
Dr. (Mrs.) S.Kantha	Former Vice Chancellor, Rajiv Gandhi University of Health Sciences, Karnataka.
Padamshree Dr. K.S. Chugh	Prof. Emeritus PGI Chandigarh.
Dr.D.K. Sharma	Prof. & Head of Deptt. of Paediatrics LLRM Medical College Meerut.
Dr.Nitin S. Vora	Director,Health Services(ESIS)Govt. of Gujarat.

Dr.F.U.Ahmed	Vice Principal, Govt. Medical College, Dibrugarh, Assam.
Dr.P.M. Jadhav	Prof. of Orthopaedics, Aurangabad and MGM Hospital.
Dr.Ajay Kumar	Consultant Urologist Hony. Secretary, Urologist Society of India (USI)
Dr.B.P. Dubey	Prof. & Head of Deptt. Forensic Medicine, Gandhi Medical College, Bhopal
Dr.M.K. Sharma	Prof. of Surgery, SMS Medical College, Jaipur.
Dr.Ved Prakash Mishra	Dean, Medical Faculty, Nagpur University & Chairman of PG Committee, MCI (Special invitee).

Apology for absence was received from Dr. V.K.Puri.

1. **Minutes of the last meeting of the Executive Committee held on 13.3.2003 – Confirmation of.**

The minutes of the meeting of the Executive Committee held on 13.3.2003 were confirmed with the correction on page No. 1 para 2. In 6<sup>th</sup> line reading as “of India, he sought a discussion on the same”. After the word 'same' it should be added that “Prof. P.N. Tandon stated that this

matter should be discussed in the presence of Prof. N. Rangabashyam”. At this very point of time Prof. Rangabashyam joined the meeting.

2. **Minutes of the last meeting of the Executive Committee held on 13.3.2003 – Action taken thereon.**

The Executive Committee noted the action taken by the office on the various items included in the minutes of the meeting of the Executive Committee held on 13.3.2003 along with the following corrections:-

1. Page No. 1 – in the column action taken thereon – following be added after para “A letter.....Dr. Rangabashyam”.

“Legal opinion has been received from the Council Advocate and item is included in the Agenda of this meeting.”

2. Page No. 3 – Item No. 34 – Standardisation of Digital information to facilitate implementation of Tele Medicine systems using IT – Enabled services.

Action taken in the matter be read as under:-

“Letter sent to Dr. Setalvad and Dr. B.V. Adkoli, AIIMS members of the Expert Committee on 25.3.2003. However, Dr. Adkoli returned the letter with a request to refer this matter to Dr. R.S. Tyagi, Dy. Director, Computer Sciences, AIIMS who is the nodal person for tele-medicine project at AIIMS. Accordingly letter sent to members of the Expert Committee on 8<sup>th</sup> April, 2003 which includes Dr. R.S. Tyagi, Dr. Mahender Bhandari, Dr. Ganapati and Dr. A.R.N. Setalvad.”

3. Item No. 40 – To consider the matter.....Sciences, Faridkot.

Action taken in the matter be read corrected as “Reminder sent on 09.04.2003. Reply awaited”.

4. Item No. 16 – MBBS (Devi Ahilya Vishwavidyalaya) Continuance of recognition in respect of students being trained at MGM Medical College, Indore.

Action taken in the matter be read as corrected – “Decision of the Executive Committee communicated to the college authorities on 2.4.2003 with copy to University, DME & State Govt. of Madhya Pradesh” in place of ‘of MCI’ as mentioned.

5. Item No. 22 – Areas where more attention has to be given in future.

Action taken be read as under:-

Sub-Committee has been constituted by the President (Acting) consisting of the following.

Dr. Bhirmanandham  
Dr. Indrajit Ray  
Dr. Ajay Kumar

6. Item No. 25 – “Empanelment as Standing Counsel for Medical Council of India in the High Court of Punjab & Haryana at Chandigarh” be read corrected as “Inclusion of the name of an Advocate to defend Medical Council of India in the High Court of Punjab & Haryana at Chandigarh”.

The minutes under this item be read as – The Executive Committee approved the name of Mr. Gurminder Singh to be included in the panel of advocates for defending the MCI in the High Court of Punjab & Haryana High Court at Chandigarh.

7. Item No. 39 – Continuance of recognition.....State of Uttar Pradesh.

Against the last para of the decision – action taken be read as “Reminder sent to the Govt. of India on 07.04.2003. Reply awaited”.

8. Item No. 57 –

Appointment of Maj.Gen (Retd.) Virendra Singh for the post of Director, Pt. B.D. Sharma PGIMS, Rohtak.

The minutes recorded under this item be read as corrected as under:-

The Executive Committee decided to refer the matter back to the Teachers' Eligibility Qualifications Sub-Committee for its consideration.

The Action taken in the matter be read as "The matter will be placed before the ensuing meeting of the T.E.Q. Sub-Committee".

9. Item No. 65 – Be read as corrected as under:-

Constitution of the DPC/Selection Committee for the post of Secretary, MCI Zonal Inspectors and Administrative Officer.

The Executive Committee decided as follows:-

(a) Secretary, MCI:

1. Dr. Indrajit Ray, Dean, R.G. Kar Med. College, Calcutta
2. Dr. Nitin Vora, Director, Health Services (ESIS) Govt. of Gujarat
3. Dr. D.K. Sharma, Professor & Head, Deptt. of Paediatrics, LLRM Medical College, Meerut

(b) Zonal Inspector:

1. Dr. (Mrs.) Usha Sharma
2. Dr. F.U. Ahmed
3. Dr. B.P. Dubey

(c) Administrative Officer:

1. Dr. S.N. Mishra
2. Dr. Ajay Kumar

Before taking up the subsequent agenda Prof. K.S. Chugh with the permission of the Chair stated that he was not present for the Executive Committee meeting dated 13.3.2003 and upon going through the minutes of the meeting and the newspaper reports published in Indian Express Chennai edition on 28.2.2003 and clarification of Prof. N. Rangabashyam published in the same daily dated 11.3.2003, he opined that if the contents of the newspaper report were true then the same was agonizing and painful as well. The allegations which have been quoted in the name of Prof. Rangabashyam against the Council in the newspaper publication, have not been controverted

in the clarification that has been published. The denial in totality as stated by Prof. Rangabashyam in the Executive Committee meeting is not reflected in the clarification. As such for a common reader the allegations brought out remain undenied. Hence, it was necessary that the facts on this count are made known to all concerned including through publication in the concerned newspaper. He also observed that such incidents ultimately dilute the cordiality between the Adhoc Committee and the Executive Committee of the Council who otherwise working with perfect trust, harmony and understanding in the larger interest of the MCI.

Dr. Kesavankutty Nayar, Chairman informed that in view of the denial, in totality by Prof. Rangabashyam in the meeting of the Executive Committee on 13-03-03 in person, of the contents of the news paper report published in the Indian Express, Chennai edition, dated 28-02-03, the Committee along with the Adhoc Committee members have unanimously decided that Council shall clarify the same for publication to the concerned news paper and approach the Press Council of India for remedial action upon seeking legal opinion from the Council advocate.

At this point of time Prof. P.N. Tandon observed that the said issue has already been discussed where Prof. Rangabashyam brought out the necessary facts of Prof. Rangabashyam clearly denying the contents of the news clipping in the daily edition of the New Indian Express dated 28.2.03 which are attributed to him and appropriate decision thereon is reflected in the minutes of the Executive Committee dated 13-03-03 that have been confirmed today.

The Chairman further informed that legal opinion as sought by the Executive Committee as per its decision taken at its meeting held on 13.3.2003 has been received and the same is placed for consideration of the Executive Committee as item No. 39 of the agenda for today's meeting. Further discussions if any can be held under that item.

3. **Establishment of medical college at Vizianagram (Maharajah Instt. of Medical Sciences, Nellimarla, Vizianagram by Sri Rama Educational Trust, (A.P.)**

Read : The inspection report (18<sup>th</sup> & 19<sup>th</sup> March., 2003) for establishment of medical college at Vizianagram (Maharajah Instt. of

Medical Sciences, Nellimarla, Vizianagram by Sri Rama Educational Trust, (A.P.).

The Executive Committee considered the inspection report (18<sup>th</sup> & 19<sup>th</sup> March,2003) and noted that –

1. the Essentiality Certificate dated 2.06.2001 issued by the State Govt. of Andhra Pradesh for establishment of medical college at Vizianagram certifies that the “applicant owns and manages a 300 bedded hospital which was under construction”. From the inspection report carried out on 18<sup>th</sup> & 19<sup>th</sup> March,2003, the Committee noted that Hospital has been made functional since last 7 months only.
2. The hospital building comprises of two blocks. As the terrain is sloppy, the construction of the building has been made at different levels on gradient. Three floors of the building are ready while two other floors are under construction. Lifts are not yet installed. College building is also not yet constructed. Ancillary buildings like hostels, animal house, etc. are also under construction.
3. The teaching beds have not been provided in the nursing stations, treatment rooms and pantry properly in each ward. In Paediatrics ward, cots for babies with side rails need to be provided.
4. Working arrangements in the OPDs need to be reorganized to provide proper teaching facilities. Orthopaedics OPD needs to be shifted to lower level. Examination trays, patient couches and X-ray viewing boxes are not available in all the rooms and need to be provided. Screening curtains for the privacy of the patients need to be provided. Departmental OPD registers need to be maintained. The hospital needs to develop a system wherein the OPD case sheets are retained in the hospital as at present it is handed over to the patient and no record is kept in the hospital.
5. Clinical material as available is inadequate. Bed occupancy is 58.33% as against the requirement of 80%.
6. At present two O.T.s are available. The number of O.Ts. need to be increased to four as per requirement.

7. Blood bank is not functional.
8. Central laundry is presently manual.
9. Though EPABX with installed capacity of 72 lines is available, however, intercom connections are not yet installed.
10. Central kitchen & canteen are not functional.
11. Incinerator is not yet provided.
12. Central records and registration department needs to be reorganized.
13. The teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine have not been established though some of the equipments have been procured but they are yet to be installed.
14. Lecture theaters, college building, animal house, central workshop, mortuary block, nurses' hostel, residents' quarters and boys' & girls' hostels are not yet constructed.
15. Shortage of teaching staff is as under:

Professor: 1 {Anatomy: 1}

Associate Professor: 2 {Anatomy: 1, Microbiology: 1}

Assistant Professor: 2 {Surgery: 1, Radio diagnosis: 1}

Tutor / Reg. / Sr. resident: 2 {Pathology: 1, Radio diagnosis: 1}

Total faculty shortage: 5 out of 40 – i.e. 12.50 %

Total Tutor / Resident shortage: 2 out of 57 – i.e. 3.51 %.

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

In view of above, the Committee decided to recommend to the Central Govt. not to issue Letter of Intent for establishment of Maharaja Institute of Medical Sciences, Nellimarla, Distt. Vizianagram, A.P. u/s 10A of the Indian Medical Council Act, 1956.

The Committee further decided to write a letter to the Secretary (Health), Govt. of Andhra Pradesh asking to intimate as to how they had



issued Essentiality Certificate dated 02.06.2001 certifying that the applicant owns and manages a 300 bedded hospital when the hospital had been made functional only 7 months back.

4. **Establishment of medical college at Amalapuram by Mother Teresa Education Society, Amalapuram (A.P.)**

Read : The inspection report (21<sup>st</sup> & 22<sup>nd</sup> March, 2003) for establishment of medical college at Amalapuram by Mother Teresa Education Society, Amalapuram (A.P.).

The Executive Committee considered the inspection report (21<sup>st</sup> & 22<sup>nd</sup> March, 2003) and noted that -

1. the Essentiality Certificate dated 27.08.2002 issued by the State of Andhra Pradesh for establishment of medical college at Amalapuram by Mother Teresa Education Society, Amalapuram (A.P.) certifies that the “applicant owns and manages a 300 bedded hospital which was under construction”. From the inspection report carried out on 21<sup>st</sup> and 22<sup>nd</sup> March, 2003, the Committee noted that Hospital was made functional only since last 2 months.
2. The teaching beds have not been provided with nursing stations, treatment rooms and pantry need to be provided properly in each ward. In Paediatric ward, cots for babies with side rails need to be provided.
3. The clinical material as available is inadequate. Bed occupancy was 45.67% as against the requirement of 80%. Daily OPD attendance was 420.
4. At present two O.T.s are available. The number of O.Ts. need to be increased to four to meet the requirement.
5. CSSD, Central kitchen and canteen are yet to be made functional.
6. Blood bank is not available.
7. Central laundry is presently manual.

8. An EPABX with capacity of 125 lines is available, however, intercom connections are under installation.
9. Incinerator is not yet provided.
10. Central records and registration department needs to be reorganized.
11. The teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine have not been established. Some equipment has been procured but yet to be installed.
12. Lecture theaters, college building, animal house, central workshop, mortuary block, nurses' hostel, residents' quarters and boys' & girls' hostels have not yet been constructed.
13. Staff quarters for 20 Residents & 30 Nurses have been leased by the college in the town at a distance of ½ km. No other accommodation is available.
14. Shortage of staff:

Professor: 1 {Physiology: 1}

Associate Professor: 8 {Anatomy: 2, Physiology: 1, Biochemistry: 1, Pathology: 1, Microbiology: 1, Orthopaedics: 1, Radiodiagnosis: 1}

Assistant Professor: 9 {Anatomy: 3, Physiology: 2, Lecturer in Biophysics: 1, Biochemistry: 1, Pathology: 1, Dentistry: 1}

Tutor / Sr. Resident: 7 {Anatomy: 2, Physiology: 2, Microbiology: 1, Forensic Medicine: 1, Community Medicine: 1}

Jr. Resident: Nil

Total faculty shortage: 18 out of 40 – i.e. 45.00 %

Total Tutor / Resident shortage: 7 out of 57 – i.e. 12.28 %.

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

In view of above, the Committee decided to recommend to the Central Govt. not to issue Letter of Intent for establishment of medical college at Amalapuram by Mother Teresa Education Society, Amalapuram (A.P.) u/s 10A of the Indian Medical Council Act, 1956.

The Committee further decided to write a letter to the Secretary (Health), Govt. of Andhra Pradesh asking to intimate as to how they had issued Essentiality Certificate dated 27.08. 2002 certifying that the applicant owns and manages a 300 bedded hospital when the hospital has been made functional only 2 months back.

5. **Establishment of medical college at Amalanagar ( Amala Instt. of medical sciences, Amalanagar) by Amala Cancer Hospital Society, Trissur.**

Read : The inspection report (20<sup>th</sup> & 21<sup>st</sup> March, 2003) for Establishment of medical college at Amalanagar ( Amala Instt. of medical sciences, Amalanagar) by Amala Cancer Hospital Society, Trissur

The Executive Committee considered the inspection report (20<sup>th</sup> & 21<sup>st</sup> March,2003) along with the letter dated 07.04.2003 wherein it has been stated that at the time of inspection, the inspection team raised an objection to the certificate issued by the Secretary, Adat grama panchayat dated 19.09.2002 stating that the total extent of land (33.45) acres held by Amala Cancer Society in Re-survey Nos. 16 & 17 is not in order. The document pertaining to 6.6967 H.(16.6 Acres) of land assigned by the government as per the G.O.No. M.S.No.286/2002/RD, dated 05.09.2002 and subsequently under assignment registry and Patta issued by the Tahsildar, Thrissur on the contention that the title is not in proper manner. The institution authorities approached the Hon'ble High Court of Kerala and obtained a direction to Medical Council of India to proceed with processing of the application for starting a Medical College as the title to the above mentioned land i.e. exhibit P6 to P8 is in order.

The Executive Committee further noted the aims and objectives of the Society as under:-

1. To establish, administer, maintain or cause to be established administered or maintained facilities for detection, treatment of cancer and to provide general medical services to the public.
2. To conduct, promote or cause to promote research and development activities in different branches of medical and related sciences for the benefit of the public.

As per the Qualifying Criteria for establishment of new medical college - medical education should be one of the objectives of the applicant in case the applicant is an autonomous body, registered society or charitable trust.

The Executive Committee decided to obtain a legal opinion whether the aims and objectives as laid down are in conformity with the laid down Qualifying Criteria for Establishment of Medical College Regulations and also the Hon'ble High Court order with regard to possession of the land by the applicant.

6. **Establishment of medical college at Midnapore (Midnapore Medical College, Midnapore ) by Govt. of West Bengal.**

Read : The inspection report (27<sup>th</sup> & 28<sup>th</sup> March, 2003) for establishment of medical college at Midnapore (Midnapore Medical College, Midnapore ) by Govt. of West Bengal

The Executive Committee considered the inspection report (27<sup>th</sup> & 28<sup>th</sup> March,2003) along with letter dated 17.04.2003 received from the Principal Secretary, Govt. of West Bengal intimating that the State Govt. has declared the dividing public road in between the campus of the college and the attached hospital as a private road for exclusive use of Midnapore Medical College & Hospital and gates have been constructed in the entrance and exit points and the common public has no access to the road. At present the erstwhile thoroughfare is an internal road of the Medical College & Hospital and is being exclusively used by the said institution as its integral part.

On going through the inspection report, the Executive Committee noted the following deficiencies:-

1. Common room for boys & girls, examination hall have not yet been constructed.
2. In the Animal House no staff has been appointed, hence, not made functional.

3. In the Central Library the space as provided is inadequate and the staff appointed is also not as per MCI norms. The facilities of computer and internet are not yet available.
4. Statistical Unit, Central Workshop and Central incinerator have not yet been provided.
5. The present proposed facilities for boys and girls hostels are in makeshift arrangement and are not satisfactory.
6. Only six quarters have been provided for house staff.
7. Intercom facilities has not yet been provided both in college & hospital.
8. The institution needs to develop its own playground.
9. The central lab at present is doing routine work. There is a need to upgrade the functioning of the Central Lab by addition of various equipments like auto-analyser, Flame Photometer, automatic cell counter. There is also a need to develop the service Lab of Histopathology, Cytopathology, Mycology, Parasitology, virology & T.B culture etc. There is a need to add thyroid function test. In due course Blood Gas Analysis also need to be added. All these three Labs need to be brought under the respective teaching departments with a faculty member on regular basis to be posted on rotation. Labs should remain open 24hrs and the work load of the central lab needs to be increased. Side Labs are not functional.
10. The blood Bank need to be brought under the technical control of Prof & head Dept of Pathology. One faculty member by rotation needs to be posted on regular basis in the Blood Bank.
11. Though the 500 bedded Midnapore District Hospital has been given for the Medical College, however, some of the staff members like the Medical Officers, Nursing Staff, Non-teaching Staff and the Non-teaching consultants are still under the administrative control of the Director of Health Services. For proper functioning, the entire staff working in the teaching hospital need to be brought under the Medical Education Department.

The following deficiencies need to be removed to convert this hospital into a teaching hospital:-

(i) The OPD space in general for various depts. & waiting areas which is grossly inadequate need to be provided. Each OPD need to have one consultation room for the HOD/ reader, one for lecturer, one for the residents & one for teaching with adequate space, examining area (with half partition) & examination instruments including X-ray view boxes.

(ii) The audiometry room be made sound proof and be provided with air conditioner.

(iii) At present there are no clinical teaching depts.. Adequate space for each clinical dept. office, office rooms for all the staff members duly furnished, duty rooms, treatment rooms, pantry, teaching rooms in the indoors need to be provided.

(iv). The beds of some dept/ specialities need to be in continuity as far as possible. All the beds in the hospital need to be provided with bed side lockers.

(v). The indoor record maintenance needs improvement

(vi). Central Casualty Service has less beds. Modern resuscitation equipment, mobile X-ray and 24 Hrs. Lab facility need to be provided. The functioning of the casualty needs to be augmented.

(vii). There is a need to add more equipments in the Operation Theatres. Staff rooms and teaching areas need to be provided in the Anaesthesia Deptt.

(viii). There is a need to provide intensive care areas like ICU, ICCU, NICU etc. with adequate equipment, space and staff.

(ix). The space available with Deptt. of Radio Diagnosis is inadequate. There are no staff rooms. The same need to be provided along with reporting facilities. Lead glass & gloves need to be

provided. One Ultra sound machine need to be provided in Obst. & Gynae Deptt.

(x). There is a need to establish an independent central sterilization dept. to look after all the needs of the hospital i.e. all the operation theatres, indoors and OPDs with adequate staff ,space and equipments.

(xi)A mechanized laundry as per the council norm needs to be provided.

(xii). The space available in Registration & Medical Record department is inadequate. It is not computerized also.

(xiii). For an uninterrupted electric supply, the institution need to be provided with a privileged / Hot electricity line.

(xiv). The offices of C.M.O./ Civil Surgeon and rehabilitation office run by the Social Welfare Deptt. need to be shifted from the Medical College Hospital premises.

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

In view of above, the Executive Committee decided to recommend to the Central Govt. not to issue Letter of Intent for establishment of Midnapore Medical College & Hospital, Midnapore, West Bengal u/s 10A of the I.M.C. Act,1956.

7. **Amrita Instt. of Medical Sciences, Kochi - renewal of permission for admission of 2<sup>nd</sup> batch of students.**

Read : The inspection report (12<sup>th</sup> & 13<sup>th</sup> March, 2003) for renewal of permission for admission of 2<sup>nd</sup> batch of students at Amrita Instt. of Medical Sciences, Kochi

The Executive Committee considered the Council Inspectors report (12<sup>th</sup> & 13<sup>th</sup> March,2003) and decided to recommend to the Central Govt. to renew the permission for admission of 2<sup>nd</sup> batch of 100 students at Amrita Instt. of Medical Sciences, Kochi for the academic session 2003-04.

8. **A.J. Instt. of Medical Sciences, Mangalore - renewal of permission for admission of 2<sup>nd</sup> batch of students.**

Read : The inspection report (27<sup>th</sup> & 28<sup>th</sup> March, 2003) for renewal of permission for admission of 2<sup>nd</sup> batch of students at A.J. Instt. of Medical Sciences, Mangalore.

The Executive Committee considered the Council Inspectors report (27<sup>th</sup> & 28<sup>th</sup> March,2003) and decided to recommend to the Central Govt. to renew the permission for admission of 2<sup>nd</sup> batch of 100 students at A.J. Instt. of Medical Sciences, Mangalore for the academic session 2003-04.

9. **C.U.Shah Medical College, Surendranagar - renewal of permission for admission of 4<sup>th</sup> batch of students.**

Read : The inspection report (24<sup>th</sup> & 25<sup>th</sup> March, 2003) for renewal of permission for admission of 4<sup>th</sup> batch of students at C.U.Shah Medical College,Surendranagar.

The Executive Committee considered the Council Inspectors report (24<sup>th</sup> & 25<sup>th</sup> March,2003) and decided to recommend to the Central Govt. to renew the permission for admission of 4th batch of 100 students at C.U. Shah Medical College, Surendranagar for the academic session 2003-04.

10. **Fr. Muller's Medical College, Mangalore - renewal of permission for admission of 5<sup>th</sup> batch of students.**

Read : The inspection report (19<sup>th</sup> & 20<sup>th</sup> March, 2003 ) for renewal of permission for admission of 5<sup>th</sup> batch of students at Fr. Muller's Medical College, Mangalore.

The Executive Committee considered the inspection report (19<sup>th</sup> & 20<sup>th</sup> March,2003) and noted the following:-

1. Rajiv Gandhi University of Health Sciences, Bangalore conducted the inspection for grant of affiliation to Fr. Muller Medical College, Mangalore for the year 2003-04 on 13.2.2003. However, letter for continuation of affiliation has not yet been issued by the University.



2. At present the college does not have any Rural Health Centres. Though orders have been issued by the Govt. of Karnataka on 10.12.2002 for handing over three Rural Health Centres – I–Bondel (5 kms.), II-Surathkal (15 kms.), III-Atturkemral (20 kms.) under the administrative and academic control of the Dean, Father Muller Medical College, Mangalore but handing over these centres to the institution has not taken place as yet.
3. There is no separate practical laboratory for Community Medicine department. It is shared with Forensic Medicine department. There is no involvement of the forensic medicine department in the medico legal work of the casualty.
4. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Committee decided to recommend to the Central Govt. not to renew the permission for admission of 5<sup>th</sup> batch of students during 2003-04 at Fr. Muller Medical College, Mangalore.

11. **Jawaharlal Nehru Medical College, Swangi, Wardha – Increase of seat in MBBS course from 100 to 150.**

Read : The inspection report (28<sup>th</sup> & 29<sup>th</sup> March, 2003) for increase of seat in MBBS course from 100 to 150 at Jawaharlal Nehru Medical College, Swangi, Wardha.

The Executive Committee considered the inspection report (28<sup>th</sup> & 29<sup>th</sup> March, 2003) and noted the following:-

1. The Maharashtra University of Health Sciences, Nashik has granted temporary affiliation for the year 2001-2002 to J.N.Medical College, Swangi. No affiliation for 2002-2003 and 2003-2004 has been granted by the University.
2. The clinical material available in the 540 bedded teaching hospital attached to the medical college is inadequate. Average daily OPD attendance being 752 and average daily bed occupancy is 77% as against required 80%

3. Two lecture theatres as available should have 180 seats and one more lecture theatre is required.
- 4.. Sufficient accommodation is not available for students hostel, as well as residents hostel.
5. There is no separate hostel for interns. Interns are given accommodation along with undergraduate students.
6. More space with proper ventilation is required in all the chambers in OPD.
7. Wards are badly congested and space in between two wards is not adequate. Some of the wards are not numbered and unit distribution is not earmarked. In Psychiatry patients are not being admitted and as such the beds are lying vacant.
8. The Casualty department needs more space and needs to be organised as per norms laid down by the Council.
9. All the operation theatres should have their own cardiac monitor, ventilator and defibrillator.
10. X-ray department should have 800 MA & 300 MA x-ray machine.
11. CT Scan is not available.
12. Mechanised laundry is not available.
13. Accommodation provided in the hostel for the Nursing staff is not adequate.
14. All the pre and para clinical departments should have 2 demonstration room, each having 75-100 seats.
15. Practical laboratories of pre and para clinical departments should have a work place for 90 instead of 60.
16. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Committee decided to recommend to the Central Govt. not to issue Letter of Intent for increase of MBBS seats from 100 to 150 at J.N.Medical College, Swangi, Wardha u/s 10A of the I.M.C. Act,1956.

12. **Khaja Banda Nawaz Instt. of Medical Sciences, Gulbarga – Consideration of the matter with regard to carrying out inspection for renewal of permission for admission of 4<sup>th</sup> batch of students during 2003-2004.**  
**(ii) Basveshwara Medical College, & Hospital, Chitradurga – Consideration of the matter with regard to carrying out inspection for renewal of permission for admission of 3<sup>rd</sup> batch of students during 2003-2004**

Read : The matter with regard to carrying out inspection for renewal of permission for admission of 4<sup>th</sup> batch of students during 2003-2004 at Khaja Banda Nawaz Instt. of Medical Sciences, Gulbarga & 3<sup>rd</sup> batch of students during 2003-04 at Basveshwara Medical College & Hospital, Chitradurga.

The Executive Committee noted that the Committee at its meeting held on 09.01.2003 in view of the various deficiencies pointed out in the inspection reports of following two medical colleges did not recommend to renew the permission for admission of students for the academic session 2002-03:-

1. Khaja Banda Nawaz Instt. of Medical Sciences, Gulbarga (3<sup>rd</sup> batch)
2. Basveshwara Medical College & Hospital, Chitradurga (2<sup>nd</sup> batch)

The Committee further noted that the students were admitted in the above two medical colleges in pursuance of the interim order passed by the Hon'ble High Court of Karnataka. The Hon'ble High Court in its order had also directed that in the event of the petitioner failing to obtain the necessary permission from the Central Govt. u/s 10A this order will not aid any

equities in favour of the petitioners institutions for those students who were admitted in pursuance to the interim order passed by the court.

Since no communication has been received from the Central Govt. regarding the action taken by them on the decision of the Executive Committee inspite of D.O. letter sent to the Secretary (Health) on 26-03-03, it was decided to send a reminder to the Secretary (Health), Govt. of India for early reply.

The Committee further decided to obtain a legal opinion for carrying out the inspection of the above two medical colleges for admission against the academic session 2003-04.

13. **To consider the matter with regard to carrying out inspection of medical college at Valia, Gujrat for admission of 2<sup>nd</sup> batch of students for the academic session 2003-2004.**

Read : The matter with regard to carrying out inspection of medical college at Valia, Gujrat for admission of 2<sup>nd</sup> batch of students for the academic session 2003-2004.

The Executive Committee noted that since the land possessed by the applicant for establishment of medical college at Valia was not in a single piece as required under the Qualifying Criteria for establishment of Medical Colleges Regulations, 1999 and other deficiencies pointed out, the Committee at its meeting held on 31.10.2002 did not recommend to the Central Govt. to issue Letter of Permission for establishment of the college. However, the Central Govt. vide its letter dated 15.11.2002 had issued LOP as against the recommendations of the Executive Committee.

The Committee decided not to arrange inspection for renewal of permission for admission of 2<sup>nd</sup> batch of students at Medical College, Valia in light of the decision taken in the case of KVG Medical College, Sullia where the land possessed by the applicant for establishment of the medical college was not in a single piece.

14. **To consider the matter with regard to carrying out inspection in the Govt. Medical College, A.P. for renewal of permission for admission during the year 2003-04.**

Read : The matter with regard to carrying out inspection in the Govt. Medical College, A.P. for renewal of permission for admission during the year 2003-04.

The Executive Committee noted that in the following medical colleges in A.P. students were admitted without the statutory permission of the Central Govt. for the academic session 2002-03 as per provision of section 10A of the I.M.C. Act,1956.

Govt. Medical College, Ananthapur

Rangaraya Medical College, Kakinada against the increased intake i.e. 100 to 150.

Kakatiya Medical College, Warangal against the increased intake i.e. 100 to 150.

S.V. Medical College, Tirupathi against the increased intake i.e. 100 to 150.

Kurnool Medical College, Kurnool against the increased intake i.e. 130 to 150

The Committee further noted that at the meeting of the Executive Committee held on 09.01.2003 it was decided to obtain a merit-wise list of the students admitted in Govt. Medical College, Ananthapur without obtaining the permission for admission for the academic session 2002-03 and also for the excess admissions made in the above 4 medical colleges for the said session which has still not been received in spite of reminder sent on 3.4.2003.

The Executive Committee decided to send another reminder to the concerned authorities for obtaining the merit-wise list as already communicated to initiate action u/s 10B. It was further decided that no inspection be arranged for renewal of permission for admission against the academic session 2003-04 till the desired information is obtained. The State Government and Union of India may accordingly be informed.

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

Read : The compliance received from the Dean, D.Y.Patil. Medical College, Kolhapur alongwith the Hon'ble High Court order dt. 7.4.2003.

The Executive Committee noted that at its meeting held on 9-1-2003 it was decided to issue a show-cause notice to the college authorities in light of the deficiencies pointed out in the inspection report particularly the deficiency with regard to availability of the number of teaching beds. (There was shortage of 245 functional teaching beds). The other deficiencies were also intimated along with the show-cause notice to the college authorities on 5-3-2003.

The Committee further noted that a compliance report has been received from the authorities of D.Y. Patil Medical College, Kolhapur on the deficiencies communicated from the inspection report dated 17<sup>th</sup> & 18<sup>th</sup> Dec., 2002 which inspection was carried out in compliance of the order passed by the Hon'ble High Court of Judicature at Bombay on 12.9.2002 in W.p. No. 2324/2002 between D.Y. Patil Medical College, Kolhapur –vs- State of Maharashtra & Ors.

Upon consideration of the compliance report it is noted that :-

- (i) affiliation of the University for the year 2002-03 has not yet been granted,
- (ii) the blood bank has not yet been established.
- (iii) The college is also utilising the facilities of 150 teaching beds of CPR Hospital for teaching and training purposes.

The Executive Committee further noted the order dated 07.04.2003 passed by the Hon'ble High Court of Judicature at Bombay which reads as under:-

“The learned Counsel for the MCI stated that the common facilities were inspected by the MCI and certain deficiencies were noted and same have been communicated to the petitioner and copy of the report is placed on record of this proceeding.

As per the order dated 30.11.2000 common facilities were permitted only upto 31.7.2003. The MCI has given three years time to the petitioner to construct 500 bedded hospital as per the norms laid down by the MCI. Accordingly, the petitioner has acquired the land for the purpose of construction of the hospital building. The construction of the hospital is almost complete and hospital will become functional by the end of July,2003.

Having regard to the fact that the petitioner own infrastructure is now ready and the earlier arrangement is going to expire within three months, the MCI is directed to take fresh inspection of new facilities after 15.8.2003. Until such inspection is taken the MCI not to initiate any action against the petitioner college.

Civil application as well as the Writ Petition stand disposed of.”

In view of the above facts, the Committee decided to file an SLP before the Hon’ble Supreme Court of India against the order of the Hon’ble High Court of Judicature at Bombay for which the Council advocate be approached immediately.

16. **To consider the letter received from the Executive President & Manaing Trustee, MAMER MIMER Medical College, Talegaon in response to the decision taken by the Executive Committee at its meeting held on 13.3.2003 with regard to approval of the college.**

The Executive Committee noted that the matter along-with the legal opinion obtained from the Ld. Solicitor General of India regarding the lease deed of land was considered by the Committee at its meeting held on 13.3.2003 where it was decided to communicate the legal opinion to the college authorities. According to the legal opinion the Trust authorities have to get the deed registered for a period of at least 99 years for land and building registered in favour of the Trust.

The Committee considered the letter dated 04.04.2003 now received from the Executive President & Managing Trustee, MAMER MIMER Medical College, Talegaon enclosing therewith an undertaking on the stamp paper duly signed and notarised stating therein that the institution shall get lease deed and sub-lease deed of the land duly registered and submit the

copies thereof to MCI authorities and Govt. of India, New Delhi on or before 15<sup>th</sup> August,2003 and subject to this undertaking their case for final recognition by MCI to MIMER Medical College, Talegaon be considered favourably and cleared and they further undertake to abide by the decisions of MCI, New Delhi and Govt. of India in case of non-fulfilment of the undertaking.

The Executive Committee also considered the letter dated 15.04.2003 received from the Hony. Secretary, Hony Supdt. And President, Talegaon General Hospital & Convalescent Home, Distt. Pune intimating therein that the claim made by MAMER, Pune that they are the owners of Dr. Bhausahab Sardesai Talegaon Rural Hospital and the same is being managed by them is patently false, mischievous and is intended to mislead the Medical Council of India to obtain permanent recognition to their ill equipped Medical College and also to get permission to admit next batch of students.

In light of the above facts, it was decided to obtain a legal opinion from the Council advocate on the letter dated 15-04-03 now received and the matter be brought back for consideration of the Executive Committee upon receipt of the opinion.

17. **Periodical inspection of the facilities available at Lady Hardinge Medical College, New Delhi for continuance of recognition of MBBS degree.**

The Executive Committee noted that Periodical inspection to assess the facilities available at the college was carried out on behalf of the Council in Feb., 1992. The inspection report was sent for observations of the University/College authorities on the remarks made by the Inspectors in their inspection report. Since no response was received from the University/college authorities, the inspection report was considered by the Committee at its meeting held on 10/12/94 and in view of the gross deficiencies pointed out by the Council Inspectors in the inspection report especially with regard to staff and beds for 130 admissions, the Committee decided to issue show cause notice to the authorities concerned as to why steps should not be initiated u/s 10A of the IMC Act, 1956.

The Committee further noted that on sending repeated reminders by the office, a letter dt 06/01/1997 was received from the Principal, Medical



Suptd., Lady Harding Medical College responding to the final notice given by the Council for obtaining a compliance report which was considered by it at its meeting held on 08/03/1997. On going through the periodical inspection report (Feb., 92) along with the letter received from the Principal, the Committee decided to reduce the number of admissions to 100, in consonance with the infrastructure facilities available at the college from the 1997-98 batch as no compliance regarding rectification of the deficiencies was made by the college authorities.

The Executive Committee further noted that in response to the above decision of the Executive Committee the Principal, Lady Hardinge Medical College, Delhi vide her letter dated 30/04/1997 submitted the compliance report which was to be verified by the Council Inspectors on 19/05/1997. The compliance verification inspection had not been carried out as per request received from the Principal of the college for postponement of the inspection. Next periodical inspection that was due to be carried out during 1997 was also arranged to be carried out on 18<sup>th</sup> & 19<sup>th</sup> Feb., 1999. However, inspection of the college could not be carried out inspite of the repeated request to the college authorities for submitting compliance report. This college is continuing to admit 130 students annually.

In light of the above facts, the Committee decided to carry out immediate inspection of the college.

18. **CA No.4604/2000 - The Deputy Secretary (MERT) & Ors. Vs. Sanchita Biswas.**

Read : The matter with regard to reservation of 3% seats for disabled candidate for admission to Medical Course.

The Executive Committee considered the CA No.4604/2000 - The Deputy Secretary (MERT) & Ors. Vs. Sanchita Biswas along with the legal opinion obtained from the Council Advocate who opined that "In view of the judgement of the Hon'ble Supreme Court dated 11.9.2002 in the Kerala case and dated 18.9.2002 in Sanchita Biswas's case, the Council is duty bound to permit 3% reservation for admissions in medical courses for the Physically handicapped with locomotory disorders as has been held by the Hon'ble Supreme Court.

As per the legal opinion the Executive Committee considered the matter with regard to 3% reservation for admissions in medical courses for the physically handicapped in light of the orders of the Hon'ble Supreme Court dated 11.9.2002 in the Kerala case and dated 18.9.2002 in Sanchita Biswas's case and noted that the matter was considered by the Committee at its meeting held on 22<sup>nd</sup> Jan., 2001 and the Sub-Committee was constituted under the Chairmanship of Dr.K.Ananda Kannan to frame guidelines for making reservation of seats in medical courses for persons with disabilities. The Sub-Committee submitted its report on 4<sup>th</sup> April,2001. In the meanwhile, the Chief Commissioner for Disabilities had passed an interim order dated the 9<sup>th</sup> February,2001 which was also considered by the Sub-Committee.

The Committee further noted that it at its meeting held on 24<sup>th</sup> April,2001 considered the report of the Sub-Committee and decided to call for the comments of the Specialist Association of ENT Specialists, Ophthalmologists, Orthopaedics Surgeons and General Surgeons on the report of the Sub-Committee. Accordingly the views of Associations were called for. While three associations gave their comments, the All India Ophthalmic Society had proposed to place the matter before its office bearers Sub-Committee, before sending their reply.

In order to have a broader view on the Sub-Committee report, the President of the Council, at that time, convened a meeting of some experts on 24<sup>th</sup> May,2001 where the Sub-Committee went into the details with reference to the Reservation of seats in medical course for Persons with Disabilities as per the Persons with Disabilities (Equal opportunities, Protection of right and Full Participation) Act,1995. The provisions of Section 39 of the Act were carefully studied and based on this an agreement was reached to follow 3% reservation for Physically Handicapped for admission to medical course also. The categories of people under disabilities as classified under the Act covers the following three categories:-

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

The 3% of reservation under the above 3 categories has been apportioned as 1% under each category u/s 33 of the 1995 Act. It was also noted that the Govt. of Tamil Nadu in their G.O. No.137 dated 29.1.1990

had also fixed the same percentage of reservation for these categories for admission to MBBS/Engineering etc. courses

The Sub-Committee in the same meeting had also noted that the Hon'ble High Court of Calcutta in its judgement (case No.M.A.T.No.3105 of 1998 & C.A.No.7514 of 1998) had also agreed upon the apportioning of the reservation under the above three categories in respect of the posts under Government. The same logic is applied for reservation for educational institutions also and taking the guidelines adopted by the Govt. of Tamil Nadu, the Committee was of the opinion that such apportioning of reservation is both logical and sustainable in the Court of Law.

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

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

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

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

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

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

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

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

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

The Executive Committee, in the light of the legal opinion obtained advising that as per the law laid down by Hon'ble Supreme Court it is imperative to extend the reservation in admissions in medicine courses for physically handicap persons, decided to carry out the necessary amendments in the statutory regulations of the Council for implementation of the judgment of the Hon'ble Supreme Court. The necessary steps be taken by the office for amendment of the regulations by sending the appropriate recommendations on behalf of the Council to the Central Government for its approval so as to incorporate the benefit of 3% reservation in admissions, in the statutory regulations.

19. **Regarding carrying out surprise inspections of the medical institutions wherever necessary without giving any intimation to the concerned institution.**

Read : The report of the Sub-Committee with regard to carrying out surprise inspections of the medical colleges.

The Executive Committee considered the following recommendations of the Sub-Committee dated 06.02.2003 constituted to work out the detailed modalities including the expenditure etc. involved for carrying out surprise inspections of the medical colleges:-

“The present Committee was constituted by the General Body of the Council in its meeting held on 3-4 June,2002 (vide item No. 43) whereby a need was emphasised of carrying out surprise inspections wherever necessary without giving any intimation to the concerned institution.

It may be noted that the Council is required to carry out inspections for the various purposes catalogued in the IMC Act,1956 and governing regulations that have been created thereunder as subordinate legislations. With reference to undergraduate course, inspection is required to be carried out by the Council under the scheme prescribed with section 10A of the I.M.C. Act, for the purpose of starting of a medical college, increase in its intake capacity and for the purposes of recognition of the undergraduate degree being conferred by the said institution. Periodic inspections are also required to be carried out for renewal of recognition granted by the MCI every five years.

Likewise, the inspections are required to be carried out for starting of postgraduate courses including increase if any in intake capacity sought by the college in terms of the scheme u/s 10A of the IMC Act and also for the recognition of the concerned postgraduate course for the purpose of the inclusion in the appropriate schedule of IMC Act,1956.

All these inspections are carried out on behalf of the Council through Whole-time Inspectors/Visitors along with suitable persons nominated by the Executive Committee for discharging the said obligation. The inspections are carried out upon an adequate notice which is given to the concerned institution and the dates of the inspections are required to be finalised by the appointed inspectors of the Council and the concerned institution by mutual consultation.

It is the common perception of the members of the Council that there have been occasions where the required infrastructural facilities are temporarily created for the purpose of inspection only. This apparently results in an observation in the inspection report that the requisite requirement prescribed by the Governing Regulations of the Council are met with, whereas the things are actually otherwise. Such a situation is neither fair nor conducive to the cause of betterment of medical education including fulfilment of the very responsibilities that have been entrusted to the MCI specially in regard to generation, maintenance, and monitoring of the standards of medical education in terms of the IMC Act,1956. Precisely, it is for this very reason that the members in the meeting of the General Body ventilated the need and relevance of causing surprise inspections.

It is a matter of record that Council has carried out such surprise inspections in the past that have yielded startling results. It is for this very reason, the Committee feels that the modality of surprise inspection (both for undergraduate and postgraduate courses) should stay as a handy procedure for its operational effect. The element of secrecy and confidentiality is going to be a hall mark on which its effective success shall be based. Hence the Committee feels that no intimation in regard to such inspections be given to the concerned institution. The members of the inspection team should be intimated about the same, 48 hours before the causation of the said inspection, with the necessity of maintenance of confidentiality of the same made known to them. The said inspection should be finished by the inspection team in one day and report thereof be submitted to the Council within 48 hours from the date of causation of the same.

In view of an incident on record in which one of the inspectors of the Council, who is one of the renowned professors of Maulana Azad Medical College, Delhi was manhandled including filing of a false and concocted FIR against him in Jaipur, it is necessary that arrangement for necessary Police protection for inspectors causing surprise inspection should be worked out. The same may be achieved by a letter to the concerned official of the Police department of the place where the inspection is to be carried out by the inspecting team, to be handed over to the concerned official before the commencement of the actual surprise inspection wherein the Secretary of the Council shall be seeking necessary police protection to the surprise inspection team.”

The Executive Committee approved the same with correction in 7<sup>th</sup> line of the last para reading as “the concerned official before the commencement of the actual surprise”. The same be read as corrected “the concerned official if they so desire before the commencement of the actual surprise”.

The Executive Committee authorised Dr. Kesavakutty Nayar, President (Acting) and Dr. P. N. Tandon for arranging such inspections as and when required.

20. **Medical Education – Establishment of Medical Colleges in Private Sector in the State – certain Amendments to Medical Council of India Regulations, 1999 – requested – regarding.**

Read : The letter dated 11.2.2003 from the Principal Secretary, Govt. of A.P. suggesting certain amendments in the Regulations of the Council.

The Executive Committee considered the letter dated 11.2.2003 received from the Principal Secretary, Govt. of A.P. suggesting certain amendments in the Regulations of the Council.

The Committee noted that the General Body at its meeting held on 24<sup>th</sup> March,2003 while discussion in the matter with regard to 'requirement of extra staff in certain departments conducting postgraduate courses' decided to authorise the President to form a Committee to review the entire regulations on curriculum, Minimum Standard Requirements for starting of a medical college with 50/100/150 Admissions Annually, requirement of staff i.e. teaching and non-teaching, requirement of the equipments etc. The draft paper prepared by this Committee then be circulated to all the Medical Colleges, Universities, State Govts. and members of the Council for obtaining their suggestions/recommendations. This draft paper along with any suggestions be then discussed at a national workshop which may be held for a day or two at Delhi.

The Committee decided that suggestions given by the Principal Secretary, Govt. of A.P. for amendments in the Regulations be placed before the Committee which will be constituted by the President as per the above quoted decision of the General Body.

21. **Enhancement of the maximum marks in some of the subjects of MBBS course – Recommendations of Academic Senate – Request received from the Registrar, NTR University of Health Sciences, Vijayawada – Reg.**

Read : The letter received from the Registrar NTR University of Health Sciences with regard to enhancement of the maximum marks in some of the subjects of MBBS course.

The Executive Committee considered the letter received from the Registrar, NTR University of Health Sciences, Vijayawada with regard to enhancement of the maximum marks in some of the subjects of MBBS course. Since the matter pertains to amendments in the Regulations of the Council on Graduate Medical Education,1997, the Committee decided that the same be placed before the sub committee which will be constituted by

the President in light of the General Body decision taken at its meeting held on 24-03-03.

22. **Increasing the duration of the first phase of MBBS to 1 ½ years – Recommendation of Academic Senate – Request received from the Registrar, NTR University of Health Sciences.**

Read : The letter received from the Registrar, NTR University of Health Sciences, Vijayawada with regard to increase the duration of the first phase of MBBS to 1 ½ years.

The Executive Committee considered the letter received from the Registrar, NTR University of Health Sciences, Vijayawada, with regard to increase the duration of the first phase of MBBS to 1 ½ years. Since the matter pertains to amendments in the Regulations of the Council on Graduate Medical Education, 1997, the Committee decided that the same be placed before the sub committee which will be constituted by the President in light of the General Body decision taken at its meeting held on 24-03-03.

23. **Migration of Mr. Shorya Vardhan Azad from JJM Medical College, Davanagere to Govt. Medical College, Chandigarh – Request received from the candidate to condone the period of granting migration due to administrative delay and allow her to appear in 2<sup>nd</sup> professional MBBS examination for which she is three months short.**

Read : The matter with regard to Migration of Mr. Shorya Vardhan Azad from JJM Medical College, Davanagere to Govt. Medical College, Chandigarh was considered. The representation of the candidate dated 28.3.03 for condonation and permission to him for appearing in the 2<sup>nd</sup> professional MBBS examination was considered. The fact that there had arisen an impasse in the functioning of the Council during that time was also considered. It was observed that the application was received with documents on 9<sup>th</sup> January, 2002 in the Council office and that the application seeking migration came to be allowed after completion of required formalities and on obtaining the necessary clarifications. In the circumstances as explained in the representation of the candidate and the peculiar circumstances resulting into an impasse in the functioning of the



Council during the time when the application was received and processed, it was decided to allow the request of the candidate for permitting him to appear for the 2<sup>nd</sup> MBBS professional examination.

24. **Complaint against Dr.H.C.Raheja, Dr. Depak Raheja and Dr. Nikhil Raheja as alleged by Sh.Ashok Jain.**

Read : The recommendations of the Ethical Committee on the complaint against Dr.H.C.Raheja, Dr. Depak Raheja and Dr. Nikhil Raheja as alleged by Shri Ashok Jain.

The Executive Committee approved the following recommendations of the Ethical Committee:-

“The Ethical Committee after detailed deliberations have come to the opinion that the doctors concerned were responsible for causing harassment to the patients and the party by not supplying them the medical certificate which was required to be done under law and which fact has been viewed by the Ethical Committee with grave concern.

Further the doctors named above have not co-operated with the investigation procedure after complained was against them by the Ethical Committee.

The Ethical Committee therefore reprimands Dr. H.C. Raheja, Dr. Deepak Raheja and Dr. Nikhil Raheja in the strongest term for their unprofessional attitude and behavior and decided to send their cases to the State Medical Councils under whom they are registered for necessary action under intimation to this Council.

The Committee hopes that the above named doctors would refrain from causing harassment to the patients and attendants in future.”

25. **Use of the title “Doctor” by Physiotherapists, Occupational Therapists and other para medical personnel.**

Read : The matter with regard to use of the title “Doctor” by Physiotherapists, Occupational Therapists and other para medical personnel.

The Executive Committee approved the following recommendations of the Ethical Committee:-

“The Ethical Committee unanimously decided that the title “Doctor” may be used by the registered medical practitioners in the modern medicine, Ayurveda, Homeopathy and Unani (whichever State it is applicable). No other group of workers in the field of medical profession whether nursing or para medical staff are or should use to title “Doctor”.”

The Committee also decided that the recommendations of the Sub-Committee may also be placed before the General Body of the Council for its consideration being a policy decision.

26. **To grant provisional/Permanent Registration to the candidates possessing foreign medical qualifications obtained from foreign countries u/s 12(2) & 13(4) where the candidates possessed either pass certificate. (Deferred item No. 56 of the Executive Committee held on 13.3.2003.**

Read : The matter with regard to grant provisional/Permanent Registration to the candidates possessing foreign medical qualifications obtained from foreign countries u/s 12(2) & 13(4) where the candidates possessed either pass certificate. (Deferred item No. 56 of the Executive Committee held on 13.3.2003.

The Executive Committee considered the matter and decided to grant provisional/permanent registration to the candidates possessing foreign medical qualifications obtained from foreign countries u/s 12(2) and 13(4) of the I.M.C. Act,1956 possessing either pass certificate or the provisional certificate.

27. **North Bengal Medical College, Darjeeling - renewal of permission for admission of 3<sup>rd</sup> batch of students against the increased intake i.e. from 50 to 100.**

Read : The Council Inspectors report (10<sup>th</sup> & 11<sup>th</sup> April, 2003) for renewal of permission for admission of 3<sup>rd</sup> batch of students against the

increased intake i.e. from 50 to 100 at North Bengal Medical College, Darjeeling.

The Executive Committee considered the Council Inspectors report (10<sup>th</sup> & 11<sup>th</sup> April,2003) of North Bengal Medical College, Darjeeling and noted the following:-

1. Shortage of teaching staff:

{a} The shortage of faculty staff is 8.70 % excluding the shortage of M.O. cum Lecturer at RHTC/UHC and 10.88 % including the shortage of M.O. cum Lecturer at RHTC / UHC as under:

{1} Professor: 1 {Radiodiagnosis: 1}

{2} Associate Professor: 4 {Forensic Medicine: 1, Surgery: 2, Radiodiagnosis: 1}

{3} Assistant Professor: 3 / 5 {Lecturer in Biophysics: 1, Antenatal Medical officer cum Lecturer: 1, Maternal & Child Welfare Officer: 1, M.O. cum Lecturer at R.H.T.C.: 1, M.O. cum Lecturer at U.H.C.: 1}

{b} The shortage of Tutor / Sr. Resident / Jr. Resident is 1.74 % as under:

{1} Tutor / Sr. Resident: 1 {P.S.M.: 1}

{2} Jr. Resident: 1 {Medicine: 1}

The designations of many staff members who were general duty officers and given teaching designations were not in conformity with the MCI regulations.

Professor – 3, Associate Professor-4, Assistant Prof. – 9 were joined the institution within the last three months.

2. In OPD Examination tray & X-ray viewing lobby are not provided in all the rooms. Soundproof air-conditioned audiometry room is available but audiometric technician or speech therapist is not available.

3. In casualty floor beds are found in emergency area while many other patients who do not require any emergency care are still kept in this area. 1 ventilator & 1 defibrillator are available in male casualty area but no such resuscitation equipment is available in the female casualty ward. Medico-

legal cases are handled by the college. Duty rosters are not exhibited. Casualty area needs reorganization with proper distribution of wards. Emergency drugs, disaster trolley & resuscitation equipment need to be kept in all the places. Duty rosters should be properly exhibited. There is no central O<sub>2</sub> or central suction in casualty area which need to be provided.

4. Requisite facilities like patient couch, X-ray view box, examination trolley, wash, etc. have not been provided in some teaching areas. Distance between two beds is much less in some wards which is required to be increased so as to facilitate teaching.

5. Monitoring & resuscitation facilities as available in ICU need to be augmented. Incubator and defibrillator need to be provided in Neonatal ICU.

6. Central clinical laboratory is located in O.P.D. building which look after both O.P.D. & indoor cases. It works only from 8:30 a.m. to 2 p.m. Emergency services are not provided by this laboratory. There is no common collection center. There is no computerization or automated equipment. The whole setup needs to be reorganized. It must work for 24 hours and provide emergency services. Equipment like auto analyzer, automatic cell counter, blood gas analyzer, etc. which are kept in the departments need to be shifted to this laboratory or to ICU.

7. Central records section needs to be computerized.

8. CSSD is not available.

9. Mechanical laundry is not available.

10. Incinerator is not available.

11. Departmental libraries of Tuberculosis & Chest Diseases, Skin & V.D., Psychiatry, Orthopaedics & E.N.T. need to be upgraded and that of Dentistry needs to be established.

12. No lecturer cum medical officer having M.D. {P.S.M.} is posted at R.H.T.C./U.H.C. Staff as prescribed under the norms for R.H.T.C./U.H.C. need to be appointed.

13. Examination hall needs to be expanded and refurbished.
14. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Executive Committee decided to recommend to the Central Govt. not to renew the permission for admission of 3<sup>rd</sup> batch of students against the increased intake i.e. from 50 to 100 at North Bengal Medical College, Darjeeling.

28. **B.S. Medical College, Bankura - renewal of permission for admission of 3<sup>rd</sup> batch of students against the increased intake i.e. from 50 to 100.**

Read : The Council Inspectors report (2<sup>nd</sup> & 3<sup>rd</sup> April, 2003) for renewal of permission for admission of 3<sup>rd</sup> batch of students against the increased intake i.e. from 50 to 100 at B.S. Medical College, Bankura.

The Executive Committee considered the Council Inspectors report (2<sup>nd</sup> & 3<sup>rd</sup> April, 2003) and noted the following:-

1. Shortage of teaching staff:

{a} The shortage of faculty staff is 7.45 % excluding the shortage of M.O. cum Lecturer at RHTC/UHC and 9.57 % including the shortage of M.O. cum Lecturer at RHTC / UHC as under:

{1} Professor: 1 {Radiology: 1}

{2} Associate Professor: 3 {Psychiatry: 1, Surgery: 1, Anaesthesia: 1}

{3} Assistant Professor: 3 / 5 {Physiology: 1, Lecturer in Biophysics: 1, Statistician cum Lecturer: 1, M.O. cum Lecturer at R.H.T.C.: 1, M.O. cum Lecturer at U.H.C.: 1}

{b} The shortage of Tutor / Sr. Resident / Jr. Resident is 3.48 % as under:

{1} Tutor / Sr. Resident: 1 {Biochemistry: 1}

{2} Jr. Resident: 3 {Skin & V.D.: 1, Psychiatry: 2}

The designations of many staff members who were general duty officers and have been given teaching designations are not in conformity with those prescribed by M.C.I. All the teaching staff members should be given designations as prescribed under the norms.

Professor – 3, Associate Professor-4, Assistant Prof. – 8 were joined the institution within the last three months.

2. There are 12 operation theaters. Some operation theatres need to be provided with 1 pulse oxymeter. No separate pre-operative & post-operative wards are available & arrangements are made within the wards. One theater is earmarked as emergency theater. Central O<sub>2</sub> supply & central suction are not available. Observance of theater discipline by the staff for aseptic & hygiene precautions is poor and requires rectification. Emergency O.T. needs to be provided with Diathermy unit. In minor O.T., emergency drugs are not available and aseptic precautions are not maintained which also needs to be rectified.

3. Dialysis unit is not available.

There are 23 beds for casualty but the casualty ward is separated from the emergency area. Resuscitation equipment is not available in the casualty area. Medico-legal cases are handled by the college. Four ambulances are available. Mobile X-ray unit is common for all the departments of the hospital. Investigative facilities are common with all the departments. Duty rosters are not exhibited. Casualty area needs reorganization. Emergency drugs and disaster trolley need to be kept in all the places. Duty rosters should be properly exhibited.

4. Orthopaedics and TB & Chest Diseases OPD run for four days per week. It should be run daily. Examination tray & X-ray viewing lobby are not provided in all the rooms. Obstetrics & Gynaecology O.P.D. requires rearrangement with more privacy required for female patients. Dental O.P.D. is provided with only 1 composite dental unit and 3 dental chairs. One more composite dental unit needs to be added.

5. In the Clinical demonstration rooms requisite facilities like patient couch, X-ray view box, examination trolley, etc. have not been provided in some teaching areas. Distance between two beds is much less in some wards which is required to be increased so as to facilitate teaching. All the beds have not been provided with lockers. There is overcrowding in some wards like Gynaecology which needs to be avoided. Equipment like treadmill, dialysis machines, electrosurgical unit, etc. is not available.

6. Medical, Surgical, Paediatric & Neonatal ICU need to be strengthened with more monitoring & resuscitation equipment.
7. The central clinical laboratory works only from 9 a.m. to 4 p.m. Emergency services are not provided. There is a common collection center in the O.P.D. There is no computerization or automated equipment. Culture facilities are not available in the central clinical laboratory and the culture tests are done in the Microbiology department. Histopathology, Cytopathology and other specialized investigations are done in the Pathology department. The workload is also less in comparison with the patient flow in the OPD & wards. It needs to be strengthened with auto analyzer and automatic cell counters and the whole setup needs to be reorganized. It must work for 24 hours and provide emergency services. Equipment like blood gas analyzer, etc. which are kept in the department need to be shifted to this laboratory or to ICU.
8. Central records section needs to be computerized.
9. CSSD is not available.
10. Mechanical laundry is not available.
11. Only a room is provided for central workshop in which no equipment is provided. Space, facilities and staff for the workshop need to be augmented.
12. In the hostels coal is used as fuel in the mess leading to smoke & soot nuisance. This needs to be replaced by gas and more exhaust fans should be installed in the kitchen. Toilet block facilities also need to be upgraded. Cupboards should be provided in the rooms.
13. Incinerator is not available.
14. Departmental libraries of Tuberculosis & Chest Diseases, Skin & V.D., Psychiatry, Orthopaedics & Anaesthesia need to be upgraded and that of Dentistry needs to be established.
15. No lecturer cum medical officer having M.D.{P.S.M.} is posted at R.H.T.C. /U.H.C. Staff prescribed under the norms for R.H.T.C./

U.H.C. need to be appointed.

16. Examination hall needs to be expanded and refurbished.
17. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Committee decided to recommend to the Central Govt. not to renew the permission for admission of 3<sup>rd</sup> batch of students against the increased intake i.e. 50 to 100 at B.S. Medical College, Bankura.

29. **Burdwan Medical College, Burdwan - renewal of permission for admission of 4<sup>th</sup> batch of students against the increased intake i.e. from 50 to 100.**

Read : The Council Inspectors report (4<sup>th</sup> & 5<sup>th</sup> April, 2003) for renewal of permission for admission of 4<sup>th</sup> batch of students against the increased intake i.e. from 50 to 100 at Burdwan Medical College, Burdwan.

The Executive Committee considered the Council Inspectors report (4<sup>th</sup> & 5<sup>th</sup> April,2003) and noted the following:-

1. Shortage of teaching staff:

{a} The shortage of faculty staff is 9.57 % excluding the shortage of M.O. cum Lecturer at RHTC/UHC and 11.70 % including the shortage of M.O. cum Lecturer at RHTC / UHC as under:

{1} Professor: Nil

{2} Associate Professor: 6 {Psychiatry: 1, Psychiatry: 1, Surgery: 2, Orthopaedics: 1, Radio diagnosis: 1}

{3} Assistant Professor: 3 / 5 {Physiology: 1, Lecturer in Biophysics: 1, Dentistry: 1, M.O. cum Lecturer at R.H.T.C.: 1, M.O. cum Lecturer at U.H.C.: 1}

The designations of many staff members who were general duty officers and have been given teaching designations are not in conformity with those prescribed by M.C.I. All the teaching staff members should be given designations as prescribed under the norms.

2. Professor: 3; Associate Professor: 3; Assistant Professor: 7 joined the institution within 3 months.



3. Dialysis unit is not available.
4. Some O.T.s need to be provided with pulse oximeter. In some of the O.T.s there is more than 1 table which needs to be rectified and only 1 table should be kept in a O.T. No separate pre-operative room is available for all O.T.s. Post-operative wards are available only for some O.T.s. Central O<sub>2</sub> supply & central suction are not available. Observance of theater discipline for aseptic and hygiene precautions by the staff is poor and needs immediate rectification. Emergency O.T. needs to be provided with Diathermy unit. In minor O.T., emergency drugs are not available and aseptic precautions are not maintained which also needs to be rectified.
5. In Casualty investigative facilities are common with all the departments. Duty rosters are not exhibited. Casualty area needs reorganization and expansion so as to avoid floor beds. Duty rosters should be properly exhibited.
6. Orthopaedic O.P.D. which runs 4 days per week should run daily. Examination tray & X-ray viewing lobby are not provided in all the rooms. Obstetrics & Gynaecology O.P.D. requires rearrangement with more privacy required for female patients. Orthopaedics O.P.D. should run daily.
7. In central clinical laboratory there is no computerization or automated equipment. Culture facilities are not available in the laboratory. All the culture tests are done in the Microbiology department. Histopathology, Cytopathology and other specialized investigations are done in the Pathology department. It needs to be strengthened with auto analyzer and automatic cell counters and the whole setup needs to be reorganized with a common collection center. Equipment like blood gas analyzer, etc. which are kept in the department need to be shifted to this laboratory or to ICU.
8. In the clinical demonstration rooms requisite facilities like patient couch, X-ray view box, examination trolley etc. have not been provided in some teaching areas. Distance between two beds is much less in some wards which is required to be increased so as to facilitate teaching. All the beds have not been provided with lockers. Equipment like treadmill, electrosurgical unit, dialysis machines, etc. is not available.
9. Medical, Surgical, Paediatric & Neonatal ICU need to be strengthened

with expansion of beds and proper monitoring & resuscitation equipment.

10. Central records section needs to be computerized.
11. CSSD is not available.
12. Mechanized laundry is not available.
13. Hostel facilities are inadequate. Overcrowding is prevalent in the hostels as 4 inmates have been accommodated in some rooms of both the boys' & girls' hostels. No cupboards for any inmate have been provided. Each inmate is not provided with a table & chair. Messing facilities are available and the mess is run by the students. Toilet block facilities also need to be upgraded. At least one more hostel each for boys & girls is required considering the increased requirements and in view of the fact the girls' hostel is also used for accommodating female interns & residents. Cupboards should be provided in the rooms. Each inmate needs to be provided with a set of cot, table & chair. No room should have more than 3 inmates.
14. Incinerator is not available.
15. Departmental libraries of TB & Chest Diseases, Skin & V.D., Psychiatry, Orthopaedics, Ophthalmology, E.N.T., Radio diagnosis & Anaesthesia need to be upgraded and that of Dentistry needs to be established.
16. Facilities at R.H.T.C./ U.H.C. need to be developed. They should be under control of the Principal/Department of the college.
17. Other observations/deficiencies pointed out in the main report.

In view of above, the Executive Committee decided to recommend to the Central Govt. not to renew the permission for admission of 4<sup>th</sup> batch of students against the increased intake i.e. 50 to 100 at Burdwan Medical College, Burdwan.

30. **Sikkim Manipal Instt. of Medical Sciences, Gangtok – renewal of permission for admission of 3<sup>rd</sup> batch of students.**

Read : The Council Inspectors report (7<sup>th</sup> & 8<sup>th</sup> April, 2003) for renewal of permission for admission of 3<sup>rd</sup> batch of students at Sikkim Manipal Instt. of Medical Sciences, Gangtok.

The Executive Committee considered the Council Inspectors report (7<sup>th</sup> & 8<sup>th</sup> April,2003) and noted the following:

1. 25% seats were filled up by the management under NRI/foreign quota for the academic session 2002-03 as against the 15% NRI/foreign quota as per the Hon'ble Supreme Court judgement in Unnikrishnan case.

2. Shortage of teaching staff:

{a} The shortage of faculty staff is 11.49 % excluding the shortage of M.O. cum Lecturer at RHTC/UHC and 13.14 % including the shortage of M.O. cum Lecturer at RHTC / UHC as under:

{1} Professor: 1 {Radiodiagnosis: 1}

{2} Associate Professor: 3 {Anatomy: 1, Microbiology: 1, Radio diagnosis: 1}

{3} Assistant Professor: 4 / 6 { Orthopaedics: 2, Antenatal Medical Officer: 1, Maternal & Child Welfare Officer: 1, M.O. cum Lecturer at R.H.T.C.: 1, M.O. cum Lecturer at U.H.C.: 1}

{b} The shortage of Tutor / Resident is 2.85 % as under:

{1} Tutor / Registrar / Sr. Resident: 3 {Pathology: 1, L.M.O. at R.H.T.C.: 1, L.M.O. at U.H.C.: 1}.

Professor – 2, Associate Profesor – 13, Assistant Professor-11 joined the college from Kasturba Medical College, Manipal within last 3 months.

25 Tutors/Senior Residents and all the Junior Residents joined on 03.04.2003 i.e. just four days before the inspection.

3. No progress has been made in terms of availability of clinical material in the hospital since the last inspection carried out. Many patients were admitted on the day of inspection for irrelevant reasons or for those treatments/procedures which can be done on outdoor basis.

4. Ward censuses are not maintained by the staff nurses. Many patients are not provided hospital dresses & uniforms. Some patients were found

loitering in the wards or lying on beds with their clothes and shoes on. Each patient needs to be provided with hospital uniform. Hospital discipline needs to be strengthened.

5. Number of deliveries in the hospital are less.
6. Workload in Radiology department is inadequate.
7. Dialysis unit is not available.
8. Casualty area needs reorganization and expansion so as to have 20 beds dedicated to casualty / emergency. Duty rosters should be properly exhibited.
9. The workload is grossly inadequate in the central clinical laboratory. It needs to be strengthened with auto analyzer and automatic cell counters.
10. Medical & Surgical ICU need to be segregated & Paediatric ICU needs to be developed with expansion of beds and proper monitoring & resuscitation equipment.
11. Medical records section needs to be reorganized with storing of data as per ICD X classification and maintenance of Bin cards.
12. Accommodation provided for residents and nurses is inadequate. It should be provided as per MCI norms.
13. Incinerator is not available.
14. More training courses on educational methodology & technology need to be organised by the medical education cell on regular basis.
15. Veterinary officer is required to be appointed as per MCI norms.
16. The central library area is smaller than the prescribed norms. The staff should be appointed as per the Council norms.
17. Facilities at R.H.T.C. / U.H.C. need to be developed. Staff prescribed as per norms needs to be appointed at R.H.T.C. / U.H.C. The control of these

centers need to be with the College. U.H.C. needs to be established in Gangtok area.

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

In view of above, the Executive Committee decided to recommend to the Central Govt. not to renew the permission for admission of 3<sup>rd</sup> batch of students during 2003-04 at Sikkim Manipal Instt. of Medical Sciences, Gangtok.

The Committee further decided to obtain merit-wise list of students admitted in excess against NRI/Foreign quota to initiate action u/s 10B of the I.M.C. Act,1956.

31. **Chhattisgarh Instt. of Medical Sciences, Bilaspur - renewal of permission for admission of 2<sup>nd</sup> batch of students.**

Read : The compliance verification inspection report (14<sup>th</sup> April, 2003) for renewal of permission for admission of 2<sup>nd</sup> batch of students at Chhattisgarh Instt. of Medical Sciences, Bilaspur.

The Executive Committee considered the compliance verification inspection report (14<sup>th</sup> April,2003) carried out on receipt of the compliance on rectification of the deficiencies pointed out in the inspection report (13<sup>th</sup> & 14<sup>th</sup> Jan.,2003) and decided to recommend to the Central Govt. to renew the permission for admission of 2<sup>nd</sup> batch of 100 students at Chhattisgarh Instt. of Medical Sciences, Bilaspur for the academic session 2002-03.

32. **Starting of Sree Balaji Medical College & Hospital, Chennai by Sree Lakshmi Amal Education Trust, Chennai – Permission of Central Govt. – Regarding.**

Read : The matter with regard to carrying out the inspection for starting of Sree Balaji Medical College & Hospital, Chennai by Sree Lakshmi Amal Education Trust, Chennai.

The Executive Committee considered the matter with regard to processing the application for starting of Sree Balaji Medical College & Hospital, Chennai by Lakshmi Ammal Education Trust received through the Central

Govt. in April, 1999 along with the copy of order dated 18<sup>th</sup> April, 1996 passed by the Hon'ble Supreme Court of India in SLP No.13879-81 of 1993 between Lakshmi Ammal Education Trust, Chennai vs. State of Tamilnadu and noted the following:-

1. In pursuance of the order passed by the Hon'ble Supreme Court of India on 31/7/95 in SLA No.13879-81/93, Lakshmi Ammal Educational Trust Vs State of Tamilnadu & Others an inspection to assess the infrastructure facilities available for establishment of the proposed medical college Sri Balaji Medical College & Hospital was carried out by the council Inspectors in August, 1995.
2. The inspection report was placed before the Hon'ble Court through Council Advocate. The Hon'ble Court vide its order dated 4/1/96 directed the petitioner to satisfy the MCI that they are about to reach the targets required by the Council.
3. In compliance of the order of the Hon'ble Court order the petitioner vide its letter dated 30/1/96 informed the Council that the deficiencies pointed out by the Council Inspectors in their inspection report in respect of the petitioner institution have been rectified completely and further requested the Council to depute an inspection team.
4. The college authorities vide MCI letter dt.9/2/96 were requested to send a detailed compliance report on rectification of the deficiencies pointed out in the inspection report carried out in August, 1995. (as the compliance was not satisfactory).
5. On receipt of the compliance another inspection was carried out in March, 1996.
6. In the meantime the Supreme Court had passed an order on 18/4/96 that the appellant has obtained necessary permission of the MCI and the Central Govt., which shall be granted as and when the MCI is satisfied that all necessary requirements have been met with.
7. The trust authorities moved an I.A. No.13-15/97 in SLP© No.13879/81/93 before the Hon'ble Supreme Court praying therein that since Dr.MGR University did not give affiliation within time for no reason

whatsoever and further took a stand that the permission of the State Govt. would be necessary before granting affiliation.

8. The petitioner through the said I.A. prayed before the Hon'ble Supreme Court to pass an order directing the MCI to carryout necessary inspection in respect of the medical college and pass an order so as to enable the Trust to start the medical college for the 1996-97 without requiring the applicant to apply to the Central Govt.

9. A prayer was also made before the Hon'ble Court to pass an order directing the University namely Dr.MGR Medical University to carryout necessary inspection if any, and pass appropriate orders to start the medical college.

10. The Hon'ble Supreme Court vide its order dated 27/3/97 dismissed the I.A. No.13 to 15.

The Central Govt. vide its letter dated 29/4/99 forwarded the application of the college authorities alongwith a copy of the Hon'ble Supreme Court order dated 18/4/96.

11. The Central Govt. in their letter also informed that in the present case since the requirement of Essentiality Certificate from State Govt. has been done away by the Supreme Court quoting the judgement in TKVTSS Trust. The Ministry may be informed whether prior consent of the affiliating university will be needed or the judgement in TKVTSS Trust and the same will also apply in the matter of affiliation. It was also informed by the Govt. that the Dr. MGR Medical University who was approached by the applicant was informed to apply for affiliation after obtaining necessary permission from the Central Govt. and State Govt.

12. In light of the above letter of the Central Govt., a legal opinion was obtained from the Council Advocate on 24/5/99 wherein he opined that prior consent of affiliation in favour of Sri Lakshmi Amal Education Trust by the concerned university is necessary and the college would not be justified in seeking exemption from fulfilling this statutory pre condition by placing reliance on the above mentioned judgement of the Hon'ble Supreme Court in the case of TKVTSS Trust. He also opined that as indicated in the letter of the Central Govt. dated 29/4/99, the Tamilnadu Dr. MGR Medical University is neither correct nor justified in requiring the applicant trust

for affiliation after obtaining necessary permission from the Central Govt. and State Govt. The Advocate also stated that such an insistence by the Tamilnadu Dr. MGR Medical University, also does not appear to be in conformity with the judgement and order dated 18/4/96 passed by the Hon'ble Supreme Court in the special leave petition filed by the applicant trust. The applicant trust, therefore, be advised to take up the matter with the university and to insist for an inspection and grant of consent for affiliation by the university for enabling the applicant trust to fulfill the necessary statutory pre-conditions of the qualifying criteria as laid down under the statutory regulations of 1993 framed under section 10A read with section 33 of the Act.

13. A copy of the legal opinion was sent to the Central Govt. Since consent of affiliation was not received, project scheme pertaining to this medical college was returned to the Central Govt. vide MCI letter dated 18/2/2000 and the Central Govt. also subsequently returned the project scheme to the applicant on 16/3/2000 stating therein that the applicant authorities are free to apply afresh after removing the deficiencies strictly in accordance with the Regulations of the MCI.

14. Further the Central Govt. vide its letter dated 7<sup>th</sup> Jan., 2002 had forwarded a copy of letter dated 6/1/2002 received from the authorities of Lakshmi Ammal Educational Trsut stating therein that proposal of the Trust along with the processing fee of Rs. 3.50 lakhs was sent to MCI in 1999. The proposal was sent in view of directions of Hon'ble Supreme Court dated 18/4/96 in SLP ( c ) No.13879-81/93. However, the proposal was found deficient by MCI on account of consent of affiliating university. The Trust authorities have informed that Bharat Instt. of Educational & Research, Chennai run by Lakshmi Amal educational Trust, Chennai has been granted status of Deemed University by Ministry of Human Resource Development.

15. The Ministry had requested to inspect the college and send the recommendations of the Council.

16. On going through the letter of the Chairperson Sree Lakshmi Ammal Trsut as enclosed by the Central Govt. vide its above quoted letter the trust authorities have informed as under:-

i/ that they are in possession of 25 acres of land in a single piece.



- ii/ 300 bedded running hospital and college in a unitary campus on the same.
- iii/ Fulfilled all requirements and conditions as per Medical Council of India and ready for inspection at any time.

A copy of the time bound programme was also enclosed.

17. On perusal of the letter of the Ministry of Human Resource Development dated 4<sup>th</sup> July, 2002 regarding the grant of status of deemed university to Bharat Instt. of Higher Education & Research, Chennai run by Sree Lakshmi Ammal Trust, Chennai it was noted that the Ministry of Human Resource Development in exercise of the powers conferred by section 3 of the University Grants Commission Act, 1956 (3 of 1956) the Central Govt. on the advise of the University Grants Commission declared the Bharat Instt. of Higher Education & Research, Chennai comprising of Sree Balaji Dental College and Hospital, Chennai as Deemed to be University for the purpose of the aforesaid Act with immediate effect subject to a review after five years.

18. This grant of Deemed to be University status to Bharat Instt. of Higher Education & Research, Chennai is subject to the condition that:-

i/ it will adhere to the guidelines / instructions issued by UGC from time to time as applicable to the Deemed Universities.

ii/ The Deemed to be University status is granted only in respect of Sree Balaji Dental College and Hospital and the proposal in respect of Bharath Instt. of Sciences and Technology, Chennai and any other institution of Bharat Instt. of Higher Education & Research, Chennai is not approved by the Govt. of India. This position will be clarified by the Bharath Instt. of Higher Education & Research, Chennai in all its circulars, advertisements, prospectus etc.”

19. In another letter No.F-6-24/2000 (CPP-I), dated 11<sup>th</sup> Nov., 2002 enclosed with the proposal which was addressed to the Director, Bharat Instt. of Higher Education and Research, Chennai by Dr . Singh, Deputy Secretary stating that Ministry of Human Resource Development, New Delhi conveys ‘in principal’ approval of the UGC to the proposal of Bharat Instt. of Higher Education and Research, Chennai for opening a new college – Sree Balaji Medical College and Hospital, Chennai subject to fulfilment of

the conditions/requirement of the concerned statutory bodies. **The issue of bringing this college under the Ambit of the Deemed University will be considered once the college is started.**

20. From the above letters it was observed that Deemed to be University status was granted only in respect of Sree Balaji Dental College and Hospital and Deemed to be University status and not to the Sree Balaji Medical College & Hospital, Chennai.

21. Hence the scheme for starting of above proposed medical college was returned to the Central Govt. on 23/1/2003 for further necessary action at their end. The Executive Committee further considered the letter dated 12<sup>th</sup> March, 2003 as forwarded by the Central Govt. issued by the University Grants Commission conveying their No Objection to the proposal of Bharat Institute of Higher Education and Research Chennai – deemed university – to establish Sree Balaji Medical College & Hospital at Chennai received through the Central Govt. with the request to evaluate the proposal and send the recommendations of the Council.

The Executive Committee considered this issue and observed that every notification u/s 3 of the UGC Act has to be issued by the Central Government. Such a notification u/s 3 cannot be issued by the UGC. As observed earlier, the notification u/s 3 of granting deemed university status by the Central Government in favour of this institution was only with regard to establishment of a dental college. Any modification to such a notification u/s 3, in the prima facie impression of the Executive Committee, can only be carried out by the Central Government by modifying the earlier notification. It does not appear that any such modification of Section 3 notification can be carried out by the UGC on its own. In this view of the matter, it was decided to seek a clarification from the UGC and also to obtain legal opinion whether it would be open to the UGC to send such a communication of seeking to give its no objection and then whether the Council would be obliged to advise the applicant to furnish an appropriate application u/s 10A of the Act afresh.

33. **To consider amendment to Screening Test Regulations by deleting the provision of Institution as per World Directory of Medical School from the Eligibility Criteria of Screening Test Regulations, 2002.**

The Executive Committee considered the letter dated 31.1.2003 from the Principal, College of Medical Sciences, Nepal along with letter from Dr.Charles Boelen, Department of Health Service Provision, WHO and decided to delete the World Directory of Medical Schools from the Screening Test Regulations, 2002.

**34. Vydehi Instt. of Medical Sciences, Bangalore - renewal of permission for admission of 2<sup>nd</sup> batch of students.**

Read : The Council Inspectors report (7<sup>th</sup> & 8<sup>th</sup> April, 2003) for renewal of permission for admission of 2<sup>nd</sup> batch of students at Vydehi Instt. of Medical Sciences, Bangalore.

The Executive Committee considered the Council Inspectors report (7<sup>th</sup> & 8<sup>th</sup> April,2003) and decided to recommend to the Central Govt. to renew the permission for admission of 2<sup>nd</sup> batch of 100 students at Vydehi Instt. of Medical Sciences, Bangalore for the academic session 2003-04.

**35. Yenepoya Medical College, Mangalore - renewal of permission for admission of 5<sup>th</sup> batch students.**

Read : The Council Inspectors report (10<sup>th</sup> & 11<sup>th</sup> April, 2003) for renewal of permission for admission of 5<sup>th</sup> batch of students at Yenepoya Medical College, Mangalore.

The Executive Committee considered the Council Inspectors report (10<sup>th</sup> & 11<sup>th</sup> April,2003) and decided to recommend to the Central Govt. to renew the permission for admission of 5<sup>th</sup> batch of 100 students at Yenepoya Medical College, Mangalore, Bangalore for the academic session 2003-04.

**36. S.V.S. Medical College, Yenugonda, Mahboobnagar - renewal of permission for admission of 5<sup>th</sup> batch students.**

Read : The Council Inspectors report (16<sup>th</sup> & 17<sup>th</sup> April, 2003) for renewal of permission for admission of 5<sup>th</sup> batch of students at S.V.S. Medical College, Yenugonda, Mahboobnagar.

The Executive Committee considered the Council Inspectors report (16<sup>th</sup> & 17<sup>th</sup> April,2003) and decided to recommend to the Central Govt. to

renew the permission for admission of 5<sup>th</sup> batch of 100 students at S.V.S. Medical College, Yenugonda, Mahboobnagar, for the academic session 2003-04.

**37. Approval of J.S.S. Medical College, Mysore for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore for the increased number of seats from 100 to 150.**

Read : The compliance verification inspection report (14<sup>th</sup> April, 2003) for approval of the college for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore for the increased number of seats i.e. from 100 to 150.

The Executive Committee considered the compliance verification inspection report (14<sup>th</sup> April, 2003) carried out on receipt of the compliance on rectification of the deficiencies pointed out in the inspection report (20<sup>th</sup> & 21<sup>st</sup> May, 2002) and decided that J.S.S. Medical College, Mysore be approved for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore for the increased number of seats from 100 to 150.

**38. Grant of teaching designation to the eligible non-teaching doctors/GDMOs of CHS cadre working in the Vardhman Mahavir Medical College and Safdarjung Hospital – reg.**

Read : The matter with regard to Grant of teaching designation to the eligible non-teaching doctors/GDMOs of CHS cadre working in the Vardhman Mahavir Medical College and Safdarjung Hospital.

The Executive Committee considered the letter dated 04.04.2003 of the Central Govt., Ministry of Health & F.W. intimating that the proposal has been received from the Central Health Services for grant of teaching designation to non-teaching specialist doctors of CHS cadre for enabling them to undertake teaching activities in the Vardhman Mahavir Medical College, Delhi. The Ministry has further informed that many of such doctors are belonging to the non-teaching specialist cadre of CHS who have been recognised by the Delhi University as Supervisors for postgraduate teaching for different specialities at Sardarjung Hospital etc. On the similar pattern Guru Gobind Singh Indraprastha University, Delhi has formulated a

scheme for recognition of the eligible non-teachers/GDMOS of the CHS cadre for grant of teaching designation. The teaching designation shall be given to only those officers who have applied on their own to the GGSIP University and are eligible for the same as per the scheme formulated by the University.

The Committee considered the scheme formulated by Guru Gobind Singh Indraprastha University and as the same is not in consonance with the MCI's regulations on Minimum Qualifications for Teachers Appointment in a Medical college did not agree to accept the same.

With regard to other contents of the letter dated 08.04.2003 of Council Advocate appearing on behalf of the Council in CW No.788/2002 – Dr. Ram Prakash Bhayana & Anr. Vs. UOI & Ors., it decided that for taking further appropriate action, the copy of the order passed by the Hon'ble Delhi High Court be obtained forthwith. The further action in this regard be taken in accordance with the directions issued by the Hon'ble Delhi High Court. However, the above-mentioned decision of the Executive Committee that it does not agree with the proposal Guru Gobind Singh Indraprastha University and as the same is not in consonance with the MCI's regulations on Minimum Qualifications for Teachers Appointment in a Medical college, including the fact that the Principal of this college does not fulfil the minimum requirements for appointment as Principal of a medical college as per the statutory regulations of the Council, be informed to the Central Government.

**39. Regarding News report published in English Daily Indian Express in the Chennai City Edition, dated 28<sup>th</sup> Feb., 2003 – Legal Opinion thereon.**

Read : The matter regarding News report published in English Daily Indian Express in the Chennai City Edition, dated 28<sup>th</sup> Feb., 2003 along with the legal opinion obtained from the Council Advocate.

The Secretary read out the following legal opinion which was adopted for action as suggested:-

- a) It is open to the querist to address a communication to the editor of the New Indian Express, Chennai for issuing an

appropriate and required clarification clarifying that the contents of the news report published on 28.2.2003 are not correct and the allegations incorporated therein against the querist should be denied.

- b) If neither the suitable response from the editor is received nor the required clarification is carried out, the querist can file a petition under Section 14 of the Press Council Act;
- c) The querist can also consider initiating appropriate proceedings under Section 500 of IPC against the news reporter; its editor or any other office bearer of the newspaper responsible for the publication of the news report dated 28.2.2003.

It was further decided that the action by the Council be taken as suggested above and to begin with a letter be sent immediately to the Editor, New Indian Express at Chennai.

40. **Empanelment as Standing Council for Medical Council of India in the High Court of Kerala.**

The item be read corrected as “**Inclusion of name of Shri Mathew J. Nedumpara for defending MCI in the High Court of Kerala.**”

The Executive Committee considered the letter dated 4.12.2002 of Shri K. Francis George (Member of Parliament, Lok Sabha) on the above subject and decided that the name of Shri Mathew J. Nedumpara alongwith his bio-data be referred to the Monitoring Committee of the Council which has given the responsibility of supervising the conduct of legal cases.

41. **To note the Letter of Intent/Renewal of permission for establishment of medical college.**

The Executive Committee noted the letter of intent/renewal of permission for establishment of medical colleges issued by the Central Govt. as under:-

Name of the Medical College	Date of LOI/LOP/renewal of permission by the Central Govt..
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Govt. Medical College at Latur by Govt. of Maharashtra.	As per recommendations of the Executive Committee the Central Govt. vide its letter dated 11/3/2003 issued Letter of Permission for establishment of Govt. Medical College at Latur by for 100 admissions for the academic session 2002-2003.
Subharati Medical College at Meerut by Subharati KKB Charitable Trust, Meerut.	As per recommendations of the Executive Committee Letter of renewal of permission for admission of 3 <sup>rd</sup> batch of 100 students for the academic session 2002-2003 issued by the Central Govt. on 13.3.2003.
Era Lucknow Medical College at Lucknow by Era Educational Trust, Lucknow.	As per recommendations of the Executive Committee Letter of renewal of permission for admission of 3 <sup>rd</sup> batch of 100 students for the academic session 2002-2003 issued by the Central Govt. on 13.3.2003.
MNR Medical College, Fasalwadi, Sangareddy, Andhra Pradesh.	As per recommendations of the Executive Committee Letter of renewal of permission for admission of 2 <sup>nd</sup> batch of 100 students for the academic session 2002-2003 issued by the Central Govt. on 12.3.2003.

**42. To consider the letter of Prof. N. Rangabashyam regarding carrying out the inspection of the P.G. courses.**

The Executive Committee noted the letter dated 15.3.2003 of Prof. N. Rangabashyam along with the reply sent to him by the office on 28.3.2003 by providing information that the Anaesthesia department of Santosh Medical College, Ghaziabad was inspected by Dr. R. Rajendran, who was recommended by Dr. Rangabashyam for inclusion in the panel of inspectors.

Further that from the inspection report of department of Anaesthesiology carried out by Dr. R.Rajendran, it has been noted that in the concluding remarks Dr. Rajendran has informed that the supportive departments like Surgery, Obstetrics and Gynae., Orthopaedics, ENT, Ophthalmology, Radiology etc., he found that the institution is having adequate facilities for giving best teaching and training programme for M.D.(Anaesthesiology). Under the heading of Basic Sciences & Supporting Departments, Dr. Rajendran has again remarked that the supportive departments like Surgery, Obst. & Gynae., Orthopaedics, ENT etc. etc. are having sufficient staff members, infrastructures, teaching materials and books according to his physical verification. Hence, from the report it is evident that the supportive departments including Gynaecology department were inspected by Dr.R.Rajendran at the time of inspection. As such, observations in the communication dated 14-03-03 of Dr. Rangabashyam to the effect that Dr. Rajendran did not inspect Obst. & Gynae. department of Santosh Medical College, Ghaziabad is not in conformity with the available record.

The Committee further noted that Dr. R. Tirupurasundari of Chennai who was recommended by Dr. Rangabashyam for inclusion in the panel of inspectors, was appointed as inspector to carry out inspection of recognition of M.D.(Anaesthesiology) at Institute of Naval Medicine, INHS Ashwini which inspection was accordingly carried out after the said appointment. However, on receipt of the inspection report it came to the notice that she is Prof. & HOD of Gynaecology at Govt. Stanley Medical College, Chennai. She does not possess the necessary qualification in the concerned subject i.e. Anaesthesia. This inspection therefore would now have to be rearranged by another inspector possessing M.D.(Anaes.) qualification meaning thereby that the MCI is required to pay TA/DA twice for the same inspection.

The Committee also noted that for another inspection of department of Medicine at Santosh Medical College, Ghaziabad, Dr.(Mrs.) Geetha Lakshmipathy was appointed inspector as her name appeared under the department of Medicine in the Panel of Inspectors as given by Prof. N.Rangabashyam. However from the letter of Dr.(Mrs.) Geetha Lakshmipathy it is noted that she was Ex-Asstt. Prof. in the department of Medicine at Kilpauk Medical College, Kilpauk who at present is working as Additional Professor of Neurology at Madras Medical College, Chennai. As of now she is not Professor of Medicine hence she does not possess the requisite eligibility for appointment as inspector for M.D. (Medicine) course



in terms of guidelines prepared by the Adhoc Committee as adopted and approved by the Executive Committee and General Body respectively.

On noting the above facts, the Executive Committee decided to carry out fresh inspections for (i) the department of Anaesthesiology at Institute of Naval Medicine, INHS Ashwini for recognition of M.D.(Anaesthesia) qualification, (ii) department of Medicine at Santosh Medical College, Ghaziabad for starting M.D.(Medicine) course. The Committee further decided that TA/DA be paid even for the fresh inspections.

Prof. N. Rangabashyam at this point of time informed the Executive Committee that henceforth the following doctors from the panel of Inspectors given by him shall not be given any responsibility of inspections on behalf of MCI and they be informed accordingly :-

Dr. S.N. Motilal, Chennai.  
Dr. P.M. Hari, Chennai  
Dr. K.C. Saravanan, Chennai  
Dr. Geetha Lakshmiathy, Chennai  
Dr. R. Rajendran, Chennai  
Dr. N. Chakravarthi, Chennai  
Dr. Sudha Seshaiyam, Chennai.

At this juncture, the Chairman Dr. P.C.Kesavankutty Nayar informed the Committee that he is in receipt of three more communications from the Dr. Rangabashyam dated 31.3.2003, 9.04.2003 and 10.4.2003 respectively which have been replied by him on 10.4.2003 wherein he has informed that he shall be putting the said communication for discussion before the ensuing meeting of the Executive Committee where the members of the Adhoc Committee will also be present.

He in his letter, has further informed Dr. Rangabashyam that the request for sending the inspection reports of 4 medical colleges i.e. Sri Ramachandra Medical College & Research Institute, Chennai; Mamtha Medical College, Khamman (AP), Siddhartha Medical College, Tumkur and Adichunchanagiri Instt. of Medical Sciences, Mandya Distt., Karnataka the report of Mamtha Medical College, Khammam is already available with him as the same was included in the agenda of the Executive Committee held on 09.01.2003 and agenda of the General Body meeting dated 24-03-03. In the same letter it was further informed that the minutes pertaining to the

decision taken with regard to Mamtha Medical College, Khammam was also circulated to the members of the Adhoc Committee on 21.2.2003. Regarding other reports Dr.Rangabashyam was requested to clarify as to which of the inspection report he wishes to obtain mentioning therein the type of inspection, date of inspection etc. and Secretary was advised to send the same to Dr. Rangabashyam on receiving the clarification from him.

Regarding the letter dated 31.3.2003 wherein Prof. Rangabashyam had desired to obtain reports of Sri Ramachandra Medical College & Research Institute, Chennai; Siddhartha Medical College, Tumkur and Adichunchanagiri Instt. of Medical Sciences, Mandya Distt., Karnataka. He expressed that now his letter be treated as withdrawn and he does not need the aforesaid reports.

As regards the communication dated 09.04.2003 pertaining to the subject matter of advertisement for the Zonal Inspectors in the Council office and interview scheduled to be held on 18.04.2003 the Chairman informed the Committee that the said interview has been postponed in light of Dr. Rangabashyam's communication dated 9-04-03.

The Committee was further informed that concept of the Zonal Inspectors was not new and the decision for appointment of zonal inspectors along with prescribing the associated service conditions including eligibility, modality, constitution of Selection Committee and procedure of appointment including salary to be paid have been prescribed way back in 1996 by the Executive Committee. The minutes of the Executive Committee dated 12-09-96, the report of the two member Sub-Committee and minutes of the Executive Committee dated 17-10-96 were read out upon which Prof. Rangabashyam expressed that he was not aware of the same and hence now his communication dated 09-04-03 be treated as withdrawn.

The Executive Committee further decided to revise the consolidated payable salary to the regional inspectors to Rs.20,000/- from the existing 13,000/- per month. It was further decided that the interviews which stands postponed be held immediately.

The third letter of Prof. Rangabashyam dated 10.4.2003 regarding the selection of the Secretary on All India basis with proper advertisement, not to promote or appoint anybody holding the post in the MCI or from amongst the members of the Council and that one of the Adhoc Committee members

should be in the Selection Committee was taken up for discussion wherein it was brought out that the selection for the post of Secretary is governed by the prescribed notified recruitment rules by the Govt. of India which are binding in character. In terms of the said rules the Selection Committee has been already been constituted by the Executive Committee in its meeting held on 13.3.2003 the minutes of which have been confirmed in today's meeting (vide item No. 1) when the members of the Adhoc Committee were present.

In regard to Prof. Rangabashyam observation not to promote or appoint anybody holding the post in the office of the Council and from amongst its members of the Council, was observed by the Committee not to be in good taste and causing prejudice to legitimate rights accruable to the employees and members of the Council.

The Committee noted that making an application for public employment is a fundamental right vested with any individual in the country, hence, imposition of such untenable conditions would be unconstitutional and is liable to attract avoidable litigations.

In light of the aforesaid discussions Prof. Rangabashyam informed the Committee that now being aware of the aforesaid implications out of his communication, the same dated 10-4-2003 be treated as withdrawn.

On the request of the Chairman, the minutes with regard to withdrawal of above three communications of Prof. Rangabashyam were confirmed.

43. **Inclusion of record of research in the proforma of inspection – Regarding.**

Prof. P.N. Tandon suggested that in the proforma of inspections a column be included on record of research as it is existing for obtaining other informations by the inspector. He also suggested that the theme of the proposed workshop to be held as per the decision of the General Body dated 24.3.2003 be kept as “**CRISIS IN MEDICAL EDUCATION**” and the organisations/agencies namely ICMR, NBE, NAMS and department of Science & Technology including Ministry of Health, DGHS be associated for wider and meaningful participation. He further he opined that it is

advisable to take up with the appropriate authorities including Govt. of India the mushrooming growth of medical college and their disproportionate geographical distribution commensurate with the public needs.

Dr. Ajay Kumar desired that four zonal workshops be held for larger participation prior to the final proposed workshop on the aforesaid theme.

The Executive Committee approved the aforesaid suggestions unanimously.

**( Dr. M. Sachdeva)**  
**Secretary**

**New Delhi, dated the**  
**19<sup>th</sup> April,2003.**

**A P P R O V E D**

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