

No.MCI-5(2)/2004-Med./

MEDICAL COUNCIL OF INDIA

EXECUTIVE COMMITTEE

Minutes of the meeting of the Executive Committee held on Tuesday, the 21st September, 2004 at 8.30 a.m. in the Council Office, Aiwan-E-Galib Marg, Kotla Road, New Delhi- 110002 where the members of the Adhoc Committee appointed as per the Hon'ble Supreme Court order dated 20.11.2002 were also present.

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Present:

Dr.P.C. Kesavankutty Nayar]President (Acting)]Former Dean,]Govt. Medical College,]Trivandrum
Prof. P.N.Tandon]Former Prof. & Head of Neuro-]Surgery, A.I.I.M.S, New Delhi and]Member, Adhoc Committee]appointed by the Hon'ble Supreme]Court
Dr. (Mrs.) S.Kantha]Former Vice Chancellor,]Rajiv Gandhi University of Health]Sciences, Karnataka and Member,]Adhoc Committee appointed by]the Hon'ble Supreme Court.
Dr.D.K. Sharma]Former Prof. & Head]Deptt. of Paediatrics]LLRM Medical College]Meerut.
Dr.M.K. Sharma]Deptt. of Surgery, SMS Medical]College, Jaipur.
Dr.Ajay Kumar]Consultant Urologist]Hony. Secretary,]Urologist Society of India](USI)
Dr. P.K. Sur]Director,IPGMER,]Kolkatta.
Dr. G.B. Gupta]Prof. of Medicine, Pt.JNM Medical]College, Raipur
Dr. Nitin S. Vora]Director, Health Services(ESIS),]Govt. of Gujarat.
Lt.Col. (Retd.) Dr. A.R.N. Setalvad	- Secretary

Apology for absence was received from Prof. N. Rangabashyam, Member, Adhoc Committee.

At the outset, President (Acting) gave a report of the visit of the President (Acting) and Dr. D. K. Sharma to USA at the meeting of the National Committee on Foreign Medical Education & Accreditation (NCFMEA) held in Washington on September 17,2004.

In the earlier meeting of NCFMEA held in March,2004 in Washington, the NCFMEA deferred the action against India on its accreditation activities until September,2004. This was done when we clarified the status of recognition/accreditation in this country. The confusion regarding recognition/accreditation process being followed by the Medical Council of India in the country was the result of not responding to the communications from NCFMEA by the office and also the difference in the meaning of these two terms i.e. recognition/accreditation as used by us. The use of the term recognition by us is the same as accreditation in USA. However, in March,2004 when we were given the opportunity to address this Committee in Washington we also informed them about the administrative problems inside the MCI as a result of court cases and MCI being looked after by a non-medical person. We also described the current system of recognition and inspection of medical schools in this country. NCFMEA was also concerned about certain reports in the press regarding medical colleges in Maharashtra and wanted to know about the outcome in those cases in as much as the process of admission and fee structure was concerned. A satisfactory explanation was provided by us in this regard.

On discussions on almost all aspects in detail the NCFMEA voted to defer taking any action against the MCI/India and postponed any action till September,2004. A detailed report of the March,2004 meeting with NCFMEA, Washington has already been submitted to the Executive Committee.

They again invited us for September,2004 meeting. During the months between March,2004 to August, 2004 all relevant information regarding the process of approval, recognition, accreditation and mode of inspections being conducted by the MCI with all the details as asked for by the NCFMEA including the number of colleges, their status of recognition, total number of inspections carried out etc. were provided to them and in addition they were also requested to go through our website for getting any information.

Based on the report submitted by the MCI and a question and answer session with the members of NCFMEA to clarify/provide any other specific information, the Committee was pleased to accept the view points put forward by us. The motion was then put to vote by the members of the NCFMEA and was unanimously passed in our favour. It was declared that the MBBS degree of India be considered as an equivalent degree of MD of USA.

The Committee further requested us to provide the details of accreditation process that we have recently started with a view to grade the medical institutions in our country into different categories depending upon the infrastructural facilities, evaluation of inspection reports, education imparted & academic details and other relevant information contained in the proforma devised by us for this purpose. This information is to be sent before September,2006.

Thereafter, the Members of the Executive Committee and of the Adhoc Committee decided that only those items which are of time bound nature or which have to be sent up before the General Body of the Council, scheduled to be held on 12th October 2004, would be taken up for consideration of the Committee at this meeting.

Accordingly, the following items were deferred :

- Item No. 4
- Item No. 6 to Item No. 19
- Item No. 21
- Item No. 38 to Item No. 44
- Item No. 46, 47, 48 and Item No. 50

1. **Minutes of the Executive Committee meetings held on 16th July, 2004 and 28th July 2004 – Confirmation of.**

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council confirmed the minutes of the meeting of the Executive Committee held on 16th July, 2004 and 28th July 2004.

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

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the action taken on the various items included in the minutes of the Executive Committee meetings held on 16th July, 2004 and 28th July 2004.

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

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the list of pending items arising out of the decisions of the Executive Committee.

5. **Re-allotment of seats given as free seats in Government Quota.**

The Members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court deliberated upon the issue at length and decided as under :-

With reference to strict enforcement of time schedule for admissions and also for adherence to the time schedule laid down for consideration of applications u/s 10A of the Act in the Establishment of New Medical Colleges Regulation, 1999, the Hon'ble Supreme Court had directed the MCI to place its suggestions before the Hon'ble Supreme Court in WP(C) No.306/2004 - Mridul Dhar (Minor) & Anr. Vs. Union of India & Ors.

Accordingly, suggestions were placed before the Hon'ble Supreme Court on 30.08.2004 in the following words :-

15. *It is most respectfully submitted that for strict enforcement of the time schedule for ensuring that each medical student is exposed to complete teaching and training with the required infrastructural for the minimum duration prescribed, it is necessary and inevitable that there should also be strict adherence to the time schedule appended to the MCI Regulations of 1999 as mentioned hereinabove. Accordingly, it becomes necessary that for grant of permission/annual renewal under the provisions of Section 10A of the Act and the Regulations made thereunder the college concerned should provide the minimum infrastructural teaching and other facilities for each academic year, well in time and also approach the MCI for conduct of the inspection much prior to 15th June of each academic year by which the Council is obliged to make its recommendations to the Central Govt. for issuance of letter of permission/annual renewal for the said academic year. It is respectfully submitted that it is only when a college approaches the MCI latest in April/May of any academic year for conduct of the inspection that the MCI can make its recommendations through its Executive Committee to the Central Govt. on or before 15th June of that academic year.*
16. *In the recent past, when the deficiencies have been pointed out by the MCI in the inspection conducted in April/May of any academic year and when the Council is not obliged to carry out any further inspection for consideration for that academic year, in the larger public interest, the second*

inspection has also been carried out in the month of June/July for making the recommendations to the Central Govt. before 15th of July of any academic year enabling the Govt. to consider and grant letter of permission/annual renewal.

17. *It is further respectfully submitted that it has been submitted on behalf of certain State Govts. that for conducting the first counseling on or before 17th July of any academic year the State Govt. should know the seats matrix for that year and there should not be any addition in the seats matrix in Medical and Dental colleges after 15th July of any academic year as the same creates unsurmountable difficulties in adhering to the time schedule.*
18. *It is, therefore, respectfully submitted that neither the Central Govt. nor the MCI should be made obliged to consider any application for grant of permission/annual renewal after 15th July of any academic year.*
19. *Even for the purpose of achieving optimum utilization of 15% all India quota of MBBS seats in the Govt. Medical Colleges by the Director General Health Services, it is absolutely imperative that all the State Govts. should conduct/undertake the first counselling of the state quota on or before 17th July of any academic year. For this purpose the State Govt. would also be then required to strictly adhere to the time schedule for conduct of entrance exam, declaration of results etc. It is an accepted position that if any State Govt. fails to conduct/undertake its first counselling on or before 17th July of any academic year, it casts prejudicial impact on filling up of 15% all India seats by the candidates in the all India merit list.*
20. *It is respectfully submitted that if the vacancy position of All India seats in the Govt. Medical Colleges does not become available well before 1st of August of any academic year - i.e. before the Director General Health Services conducts the second counseling for the all India quota between 1st August and 8th August of any academic year, it becomes impossible to utilise of 15% All India seats, to the optimum level, by the candidates in the all India seats.*
- 21) *One of the most important features of this entire synchronised process where strict enforcement of one time schedule is dependent on the strict enforcement of another time schedule, it is absolutely imperative that the Deans/Principals of all colleges of the States and the Union Territories, after it has conducted its first state counseling on or before 17th July of any academic year, positively informs the Director General Health Services well before 1st August of any academic year the vacancies position of the 15% All India Quota seats in their Govt. Medical Colleges so that those All India Quota vacant seats which are not filled up by the all India merit candidates who were allocated the said seats in the first counseling, can be added in the 15% All India Quota seats remaining to be filled up through the second All India counselling to start from 1st August of any academic year.*
- 22) *In order to ensure the above, it is submitted that a direction be issued that it shall be the personal responsibility of the Health Secretaries/Chief Secretaries of each State/Union Territory to ensure the compliance therewith and for providing suitable penal consequences in the event of any non-compliance or non-adherence of timely reporting vacant seats of 15% All India Quota to the Director General Health Services well before 1st August of any academic year. Thus, the directions from this Hon'ble Court to strictly follow the*

following time schedules for the present and also for the next academic year and thereafter would be necessary :-

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

	Stage of Processing	Last date
1.	Receipt of applications by the Central Govt.	From 1 st August to 31 st August (both days inclusive) of any year
2.	Receipt of applications by the MCI from Central Govt.	30 th September
3.	Recommendations of Medical Council of India to Central Government for issue of Letter of Intent	31 st December
4.	Issue of Letter of Intent by the Central Government	31 st January
5.	Receipt of reply from the applicant by the Central Government requesting for Letter of Permission	28 th February
6.	Receipt of Letter from Central Government by the Medical Council of India for consideration for issue of Letter of Permission	15 th March
7.	Recommendations of Medical Council of India to Central Government for issue of Letter of Permission	15 th June
8.	Issue of Letter of Permission by the Central Government	15 th July
<p>Note : (1) The information given by the applicant in Part-I of the application for setting up a medical college that is information regarding organisation, basic infratructural facilities, management and financial capabilities of the Council may recommend issue of Letter of Intent by the Central Government.</p> <p>(2) Renewal of permission shall not be granted to a medical college if the above schedule for opening a medical college is not adhered to and admissions shall not be made without prior approval of the Central Government.</p>		

APPENDIX-E

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

Schedule of Admission	Seats filled up by Central Govt. through All India Entrance Examination	Seats filled up by the State Govts./ Institutions
Conduct of Entrance Examination	Month of May	Month of May
Declaration of Result of Qualifying Exam./ Entrance Exam.	By 5 th June	By 15 th June
1 st round of counselling/ admission	To be over by 30 th June	To be over by 25 th July
Last date for joining the allotted College	Within 15 days from the date of allotment of seat	31 st July

and Course	@@	
2 nd round of counselling for allotment of seats from Waiting List	To be over by 8 th August	Upto 28 th August
Last date for joining for candidates allotted seats in 2 nd of counselling from the Waiting List	Within 15 days from the date of allotment of seat (Seats vacant after 22 nd August will be surrendered back to the States/ Colleges)	31 st August
Commencement of academic session	1 st of August	
Last date upto which students can be admitted against vacancies arising due to any reason	30 th September	
NOTE : @@ Head of the Colleges should intimate the vacancies existing after the last date for joining the course by the candidate concerned in respect of the All India Quota of seats to the DGHS within seven days and latest by 23 rd of July		

TIME SCHEDULE FOR POSTGRADUATE AND SUPERSPECIALITY COURSES ADMISSIONS

Schedule for admission	Postgraduate Courses		Super-Speciality Courses
	All India Quota	State Quota	
Conduct of entrance examination	2 nd Sunday of January	Mid-Jan to Mid-Feb.	May -June
Declaration of result of qualifying exam/ entrance exam.	3 rd week of Feb.	By 28 th February.	By 30 th June.
1 st round of counseling/ admissions.	5 th March to 22 nd March.	To be over by 25 th April.	To be over by 25 th July.
Last date for joining the allotted college and course.	7 th April.	1 st May.	31 st July.
2 nd round of counseling or allotment of seats from waiting list.	No 2 nd counseling	No 2 nd counseling.	No 2 nd counseling.
Last date for joining for candidates allotted seats in 2 nd round of counseling or from the waiting list.	After 7 th April vacant seats will stand surrendered back to the states/ colleges.	Not Applicable.	Not Applicable.
Commencement of academic session.	2 nd May.		1 st August.

Last date upto which students can be admitted against vacancies arising due to any reason.	31 st May.	30 th September.
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- 23) It is further submitted that in the previous year it has been observed that on account of delay by certain medical colleges in fulfilling the minimum infrastructural, teaching and other requirements the permission/annual renewal by the Central Govt. should be granted only in August/September 2003. Some of these medical colleges, as has been informed by the State Govts., should not be included in the seats matrix for the State counselling. These colleges then informed that the free seats belonging to the State Quota had been filled up by themselves as they were not sent the students by the State Govts.
- 24) In certain other cases it has also been observed that some of the private medical colleges exceeded their 50% management quota, within their annual intake capacity. The MCI had decided to request all the concerned State Govts. to ensure that in the present academic year the necessary adjustments are made by allocation of more seats in the govt. quota seats for off setting the excess management quota made by those colleges. Certain communications in this regard issued by the MCI are annexed hereto and marked as **ANNEXURE-G (Colly)**.
- 25) It is, therefore, most respectfully submitted that for ensuring that there is no deliberate attempt on the part of any authority/college to delay the admissions for creating a situation of no allocation by the concerned State Govts. of the State Quota Seats in the private medical colleges, this Hon'ble Court may be pleased to issue appropriate directions that for any reason whatsoever if any private medical college, in a given academic year, exceeds admissions in its management quota within the annual intake capacity, it should be made to make less admissions in the management quota for the next academic year for setting off the effect of the excess admissions in the management quota in the previous academic year. It is submitted that such a direction would also ensure strict adherence to the time schedule in that there would be no benefit available in delaying the admission by the management of any private medical college.
- 26) The MCI fully supports the suggestions made on behalf of the Director General Health Services dated 23.8.2004 filed before this Hon'ble Court....."

In relation to the admissions for the academic year 2003-04, the Hon'ble Supreme Court had issued the following directions in para 21 of its judgement in the case of Islamic Academy of Education & Anr. Vs. State of Karnataka & Ors. - WP(C) No.350/1993 :-

"..... So far as the year 2003-04 is concerned, time is running out as the outer time limit for admission is fast approaching or has gone. To meet the urgent situation without going into the issues involved in the various petitions/applications, we direct that the seats be filled up by the institution and the State Governments in the ratio 50 : 50. However, if by any interim order, this Court has permitted any institution to fill up a higher percentage of seats and the seats

have been filled up accordingly, the same shall not be disturbed. It is made clear that due to the time constraint this arrangement has been made, without deciding the contentious issue involved in various pending cases....."

Thereafter, on 25.02.2004, the amendments to the Graduate Medical Education Regulations, 1997 were carried out by a notification dated 25.02.2004 whereby the following provisions have been incorporated : -

- "(6) The Universities and other authorities concerned shall organize admission process in such a way that teaching in first semester starts by 1st of August each year. For this purpose, they shall follow the time schedule indicated in APPENDIX-E"*
- (6A) There shall be no admission of students in respect of any academic session beyond 30th September under any circumstance. The Universities shall not register any student admitted beyond the said date.*
- (6B) The Medical Council of India may direct, that any student identified as having obtained admission after the last date for closure of admission be discharged from the course of study, or any medical qualification granted to such a student shall not be a recognized qualification for the purpose of the Indian Medical Council Act, 1956.*

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

Thus, all those medical colleges who, for the academic year 2003-04 had : -

- (i) made admissions beyond the management quota of 50% in violation of the above-mentioned directions of the Hon'ble Supreme Court in Islamic Academy of Education; or
- (ii) had made admissions after 30.09.2003 in the MBBS course

The Council had issued an appropriate communications for the discharge of students in view of the above-mentioned binding regulations, where the admissions had been made after 30th Sept. The Council had also issued appropriate communications of all those colleges who had exceeded the management quota of 80% by calling upon them to make a suitable set-off from their management quota for the academic year 2004-05 by making proportionately more admissions in the State Quota.

In this regard, the Council is in receipt of two communications both dated 21.08.2004 from the Secretary, Health & Medical Education Department of State of Karnataka. In relation to admissions made by KVG Medical College, Sullia, the Health Department of the State of Karnataka has informed the Council that the State of Karnataka has no objection to the re-allotment of free seats allotted to the Govt. Quota so long as 50 seats are given in a staggered manner to the candidates in the Govt. Quota over a period of 5 years.

By the second communication of the same date, the Health Department of State of Karnataka has informed the Council that the A.J. Institute of Medical Sciences, Mangalore and S. Nijalingappa Medical College, Bagalkot have not been permitted to make admissions by the Central Govt. for the academic year 2004-05. Vydehi Institute of Medical Sciences had represented to the State

Govt. that the vacancies on 30.09.2003 can be filled-up by the management and that excess admissions made by them was not intentional and not in contravention of any guidelines. It was further informed by the Health Secretary of the State of Karnataka that the State Govt. has considered the request of Yenopoya Medical College and Vydehi Institute of Medical Sciences and has stated that since no reconciliation meeting was held before 30th Sept, 2003, the State has no objection to the re-allotment of 3 seats and 6 seats respectively to the management quota of these two colleges.

This issue was reconsidered by the Committee at length. It was observed that the primary responsibility for ensuring that no college makes admissions over and above its annual intake capacity fixed by the Council, would rest with the Council itself. In other words, it is for the Council to take action in accordance with the provisions of the Act and the regulations made thereunder in all those cases, where it is found that any college had made admissions in the 1st year of the MBBS course in any given academic year, over and above its total annual intake capacity.

It was also considered that insofar as admissions in the respective quotas as fixed by the State Governments and/or by the Hon'ble Supreme Court from time to time, is the primary responsibility of the competent State and University Authorities. It is the competent State and University Authorities who are obliged to ensure that the students from the State Merit List for the State Quota are sent to the respective colleges, well in time, so that the State Quota is fully exhausted by the merit students from the State List. Once it is ensured then there is no occasion for any management of the college to make admissions over and above its management quota.

It has been seen that in certain cases where the Council had issued communications to the concerned colleges, as mentioned above, in some cases, it has been stated that the permissions were granted late thereby compelling the colleges to make admissions on the last date of admissions so that the seats are not allowed to go waste or that the allocation by the State for the State Quota from the State Merit List has not been received well in time.

Upon consideration of all the relevant facts in this regard, it has been decided by the Council that from this year, whenever it is brought to the notice of the Council that any private medical college has exceeded its management quota, it shall bring to the notice of the concerned State Govt. thereby requesting the concerned State Govt. to take appropriate action in accordance with the directions of the Hon'ble Supreme Court whereunder the quotas are fixed.

However, in all those case where it is found that the admissions have been made in any medical college after 30th Sept. of any academic year, the Council shall remain obliged to continue to take appropriate action under the above-mentioned provisions of the Graduate Medical Education Regulations of 1997, as amended on 25.02.2004.

Accordingly, it was decided that the State of Karanataka may be informed of the above-mentioned decision of the Council, requesting them to take appropriate decision in relation to their communications dated 21.08.2004, mentioned above, while keeping in mind the true factual position and the orders of the Hon'ble Supreme Court.

20. WP (C) No. 317/2000 – Malay Ganguly Vs. MCI – Professional Conduct (Etiquette and Ethics) Regulations 2002

Read : the matter with regard to WP (C) No. 317/2000 – Malay Ganguly Vs. MCI – Professional Conduct (Etiquette and Ethics) Regulations 2002

The Members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court noted the following :-

The Ethics Committee considered the letter dated 28.08.2004 of Sh. Maninder Singh, Council Advocate, in respect of Case No. WP (C) No. 317/2000 – Malay Ganguly Vs. MCI, wherein he has requested this Council to take some action in view of the judgement of this particular case. The Secretary of the Council has requested the Ethics Committee to consider this matter.

The Ethics Committee, after due consideration, decided to recommend the following :-

Q. No. (i) Whether a medical practitioner can be allowed to seek and obtain registration with more than one State Medical Council?

Ans. – As such there is no necessity of Registration in more than one State Medical Council because any Doctor, who has registered with any State Medical Council is automatically registered in the Indian Medical Register and also by virtue of Section 27 of the IMC Act, 1956, a person, whose name is included in the IMR, can practise anywhere in India.

Q. No. (ii) If the answer of the above mentioned question is in the negative, then how to create a prohibition that no medical practitioner should be allowed to seek and obtain registration with more than one State Medical Council?

Ans. – As the answer of the above mentioned Q. No. 1 is in the negative, hence the prohibition is required stating that no medical practitioner should be allowed to seek and obtain registration with more than one State Medical Council. This may be done by doing necessary amendment of the IMC Act, 1956 or by amendment of MCI Regulations of 2002.

Q. No. – (iii). If the MCI is of the view that the registration with more than one State Medical Council should not be permitted then, in my view, either an amendment to the Act would be required or such prohibition should be considered to be imposed through an amendment of Regulations of 2000 of the MCI by clearly laying down that no medical practitioner shall be entitled to seek and obtain registration with more than one State Medical Council.

Ans. – By way of amendment as proposed in Ans. No. 2, the amendment may clearly state that “No medical practitioner shall be entitled to seek and obtain registration with more than one State Medical Council.”

Q. No. – (iv) In that event each State Medical Council would be required to be requested to ensure that while considering and granting permanent registration to any medical practitioner, it should obtain an affidavit/declaration from the applicant that he/she has neither sought nor has already obtained registration from any other State Medical Council.

Ans. – We agree with the proposal given by the Council Advocate.

Q. No. - (v) If any medical practitioner is found to be registered with more than one State Medical Council and there is a complaint of alleged medical negligence then, in my view, it would be that State Medical Council who would be empowered to consider the case of alleged medical negligence in whose territory the said alleged negligence has taken place.

Q. No. – (vi) Even if a medical practitioner is practicing in more than one State, in my view, it should be that State Medical Council in whose territory the said medical

practitioner is predominantly practicing, which should grant registration to him/her. In this regard, your attention is invited to the relevant portion of the provisions of Section 33 and 34 of the Dentists Act, 1948 :-

“33 (1) A person shall be entitled on payment of the prescribed fee have his name entered on the registered when it is first prepared, if he resides or carries on the profession of dentistry in the State and if he –

- a) Holds a recognized dental qualification, or
- b)

34. (1) After the date appointed under Sub-section (2) of Section 32 a person shall, on payment of the prescribed fee, be entitled to have his name entered on the register of dentists, if he resides or carries on the profession of dentistry in the State and if he -

- i) Holds a recognized dental qualification, or

Ans. – (v) & (vi) In case of medical practitioner, who is registered with more than one State Medical Council against whom there is a complaint of alleged medical negligence, his case may be dealt with as under :-

a) If the negligent Act has taken place in the territory of State Medical Council with which he had already registered, then it will be tackled by that State Medical Council.

b) If the alleged negligent Act has taken place in a territory of a State with which he has not registered, in that case, the matter will be dealt with by the State Council with which he has registered first.

c) If the alleged negligent Act has taken place in anywhere else in the country where no State Medical Council is existing, then the case will be dealt with by the Council with which he has registered first.

d) Those issues, of which the violation falls within the purview of the MCI, the action will be taken by the MCI. In view of the fact that medical education comes under the purview of the MCI, hence all matter pertaining to medical teachers and Principals/Deans of different medical colleges, will be directly dealt with by the MCI wherein unethical act has taken place as per MCI Regulations.

It is the feeling of the Ethics Committee that MCI should ultimately cease to be a primary registering authority except for such States, who do not have a State Medical Council at present and this responsibility should also cease when such medical councils are created.

The Ethics Committee recommends that as Medical Council of India is the custodian of the IMR, all Doctors registering in a State Medical Council would also fill a separate form and pay such necessary fees as are fixed. The form along with the fees including a copy of the registration certificate is issued by State Medical Council along with a photograph of the Doctor duly pasted and attested by State Medical Council, shall be sent for each Registered Doctor to the MCI for inclusion of the names in the IMR. The MCI shall keep detailed records of the Doctors by scanning all the materials submitted.

The Members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court decided to approve the decision of the Ethics Committee as above.

22. M.N.R. Medical College, Sangareddy – Renewal of permission for admission of 3rd batch of students for the academic session 2004-2005.

Read : the compliance verification inspection report (10th Sept., 2004) for renewal of permission for admission of 3rd batch of students for the academic session 2004-2005 at M.N.R. Medical College, Sangareddy.

“The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (10th September, 2004) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 students in the 1st MBBS course for the academic session 2004-05 at M.N.R. Medical College, Sangareddy”.

23. Adhichunchanagiri Institute of Medical Sciences, Bellur – Permission for admission of students in Ist MBBS course for the academic session 2004-2005.

Read : the inspection report (10th & 11th Sept., 2004) for permission for admission of students in Ist MBBS course for the academic session 2004-2005 at Adichunchanagiri Institute of Medical Sciences, Bellur.

“The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive of the Council considered the inspection report (10th-11th September, 2004) along with the letter from the institute received through the Central Govt. dated 9.9.2004 and decided to permit the institution to make 50 admissions in the 1st year of MBBS course for the academic session 2004-05 keeping in view of the teaching and other infrastructural facilities available at the college”.

24. M.R. Medical College, Gulbarga – Renewal of permission for admission of students for the academic session 2004-2005 against the increased intake i.e. 100 to 150.

Read : the inspection report (10th & 11th Sept., 2004) for renewal of permission for admission of students for the academic session 2004-2005 against the increased intake i.e. 100 to 150 at M.R. Medical College, Gulbarga.

“The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive of the Council considered the inspection report (10th-11th September, 2004) and noted the following deficiencies:-

- “1. (a) The shortage of teaching faculty is more than 10% which is as under:-
- i) Professor : 2 (Forensic Medicine-1, TB & Chest -1)
 - ii) Associate Professor : 8 (Physiology -2, Pharmacology-1, Pathology-1, Forensic Medicine-1, TB & Chest -1, Radiodiagnosis-1, Microbiology -1)
 - iii) Assistant Professor : 10 (Anatomy -2, Physiology-3, Pathology-2, Biochemistry -2, Biophysics -1)
 - iv) Tutor : 5 (Forensic Medicine -2, Anatomy -1, Biochemistry -1, Pharmacology-1)
- (b) The shortage of Resident is 7% as under:
- i) Sr. Resident : 14 (General Medicine -5, General Surgery -5, Skin & VD -1, Psychiatry-1, Eye -1, Orthopaedics-1)
2. The available clinical material in terms of X-ray and laboratory investigation is inadequate and disproportionate to the number of patients claimed to have been attending the hospital as Outdoor & Indoor patient is as under:-

<u>Radiological Investigations</u>				
X-ray	17	22	26	38
Ultrasonography	23	14	16	17
Special Investigations	01	01	01	01
C.T. Scan	02	02	02	02
<u>Laboratory Investigations</u>				
Biochemistry	97	83	120	74
Microbiology }	16	28	16	27
Serology }	29	15	44	16
Parasitology}	02	02	02	04
Haematology	66	146	63	142
Histopathology	03	-	04	-
Cytopathology	05	-	07	-

- 3. Central Kitchen is not available.
- 4. Incinerator is available but non-functional.

5. There is one lecture theatre is available in the college and one lecture theatre is of flat type against the requirement of gallery type lecture theatre required as per Regulations.
6. Boys' Hostel is outside the campus at a distance of 6 km and Girls hostel is also located outside the campus at a distance of 2 km. The total accommodation is available for the 442 students against the requirement of 650 at this stage. The students from Dental and Pharmacy colleges run by the same society also stay in these hostels.
7. A combined block is available for interns, PGs and residents having a total capacity of 120 which is inadequate, as accommodation has to be provided for 100 interns and 114 residents i.e. total 214 persons.
8. The accommodation for nurses is inadequate as it is provided only for 72 nurses in 8 big and 20 small rooms.
9. No residential quarters are available within the campus.
10. The auditorium is make shift arrangement and can accommodate only 300 persons which is inadequate. It is also used as a sports complex and Badminton hall, which is not permissible.
11. Veterinary Officer is part time.
12. The RHTC utilized by the college - i.e. Hebbal - is under the control of the Government and the college is allowed to use its facilities for teaching purposes only. Lecture-cum-seminar room is not available at the RHTC
13. Separate registration counters for male and female patients are not available in the OPD.
14. Medical Record Section is not yet computerized and not cross-linked with outdoor and indoor registrations numbers.
15. Hospital kitchen is not available.
16. There is a common canteen for staff, students and patients' relatives. It also provides food to patients at the rate of Rs. 15/- per day.
17. The Gas cylinders in the department of Biochemistry need to be kept away in a separate enclosures.
18. Other deficiencies/remarks are in the report.

In view of above the members of the Adhoc. Committee and of the Executive Committee of the Council decided to recommend to the Central Govt. not to renew the permission for admission of 4th batch of MBBS students against the increased intake i.e. 100 to 150 at M.R. Medical College, Gulbarga for the academic session 2004-2005.”

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the inspection report (10th-11th September, 2004) along with the request received from the M.R. Medical College, Gulbarga through the Central Govt. dt. 8/9/2004 and further decided to permit the institution to make 100 admissions in the 1st year of MBBS course for the academic session 2004-05 keeping in view of the teaching and other infrastructural facilities available at the college.

25. S. Nijalingappa Medical College, Bagalkot – Renewal of permission for admission of 3rd batch of students for the academic session 2004-2005.

Read : the compliance verification inspection report (11th Sept., 2004) for renewal of permission for admission of 3rd batch of students for the academic session 2004-2005 at S. Nijalingappa Medical College, Bagalkot.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (11th September, 2004) along with the request received from the college through Central Govt. dt. 20.09.2004 and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of MBBS students for the academic session 2004-05 at S. Nijalingapapa Medical College, Bagalkot with an annual intake of 50 students.

26. A.J.Instt. of Medical Sciences, Mangalore - Renewal of permission for admission of 3rd batch of MBBS students for the academic session 2004-2005.

Read : the compliance verification inspection report (11th Sept., 2004) for renewal of permission for admission of 3rd batch of MBBS students for the academic session 2004-2005 at A.J. Institute of Medical Sciences, Mangalore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (11th September, 2004) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 students in the 1st MBBS course for the academic session 2004-05 at A.J. Instt. of Medical Sciences, Mangalore.

27. P.E.S. Medical College, Kuppam (A.P.) - Renewal of permission for admission of 3rd batch of MBBS students for the academic session 2004-2005.

Read : the compliance verification inspection report (11th Sept., 2004) for renewal of permission for admission of 3rd batch of MBBS students for the academic session 2004-2005 at PES Medical College, Kuppam.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (13th September, 2004) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 150 students in the 1st MBBS course for the academic session 2004-05 at P.E.S. Medical College, Kuppam (A.P.).

28. Basaveshwara Medical College, Chittradurga – Renewal of permission for admission of 4th batch of students for the academic session 2004-2005.

Read : the compliance verification inspection report (13th Sept., 2004) for renewal of permission for admission of fresh batch of students for the academic session 2004-2005 at Basaveshwara Medical College, Chittradurga.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (13th September, 2004) and noted the following deficiencies:-

1. Shortage of teaching staff is as under:
 - a) The shortage of teaching faculty is 20% as under:-
 - i) Professor – 2 (Paediatrics –1, Ophthalmology – 1)
 - ii) Associate Prof. – 11 (Anatomy –2, Physiology –1, Pathology –1, Microbiology –1, Community Medicine –1, General medicine –1, TB & Chest –1, Psychiatry –1, General Surgery –1, ENT –1)
 - iii) Assistant Professor – 8 (Anatomy –1, Pharmacology –1, Forensic Medicine –1, Epidemiologist –1, Statistician –1, Psychiatry –1, Orthopaedics –1, Radiology –1)
 - iv) Tutor – 2 (Pharmacology)
 - b) The shortage of Residents is 10% (i.e. 7 out of 76) as under :-
Sr. Resident 7 (Paediatric –2, Skin –1 Surgery –2, Obst. & Gynae. 2)

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

	Daily Average	Day of Inspection
O.P.D. attendance	430-550	390
Casualty attendance	09-15	06
Bed occupancy%	77-85	86%

<u>Operative work</u>				
Number of major surgical operations	01-03		01	
	03-05		05	
Number of minor surgical operations	01-02		01	
	01-		0	
Number of normal deliveries				
Number of caesarian Sections				
<u>Radiological Investigations</u>				
	O.P.	I.P.	O.P.	I.P.
X-ray	9-16		11	2
Ultrasonography	12-15		14	0
Special Investigations	0-2		0	0
C.T. Scan	0-1		1	1
<u>Laboratory Investigations</u>				
Biochemistry	25-35		31	3
Microbiology	00-07		05	0
Serology	10 –12		09	1
Parasitology	0-1		0	0
Haematology	16-22		21	9
Histopathology	02-07		03	0
Cytopathology	01-01		0	0
Others	0-01		-	-

3. Only 340 teaching beds are available at Basaveshwara Medical College & Hospital which is inadequate against the requirement of 450 beds. The shortage of teaching beds is as under:-

Department	Required	Available	Shortage
Medicine	102	86	16
Paediatrics	60	38	22
TB & Chest	15	-	15
Skin & Vd	9	9	-
Psychiatry	9	9	-
Surgery	100	80	20
Orthopaedics	60	35	25
Ophthalmology	18	12	6
ENT	18	12	6
Obst. & Gynae.	59	59	-
Total			110

4. In OPD Registration :- No register entry or computer entry is made at the registration counter. There is no proper record of OPD cases in any of the OPDs on the day of inspection. There is no teaching area in any of the departments in the OPD. In casualty, there is no patient upto 12 noon on the day of inspection
5. Hostel accommodation is inadequate as it is available only for 149 students against 450 required.
6. Residents hostel has a capacity of only 16 against 100 required as per norms.
7. No hostel is available for nurses.
8. There is no demonstration room in the wards.
9. Audiometry room is not available as per norms.
10. ICD X indexing is not followed in the medical record section.
11. No bowl sterilizer, no Glove inspection machine, no instrument washing machine, no racks, no trays and no mixers are available in CSD.
12. Only two burners with one gas cylinder are provided in the kitchen. No other facilities are available.
13. There is no provision to supply special diet as recommended by the Physician.
14. Nursing staff is grossly inadequate as under:-
Nursing Supdt. –2
Deputy Nursing Supdt. - 1
Matron – 2
Staff Nurses –122
15. Other deficiencies and remarks in the report.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate its earlier decision to recommend to the Central Govt. not to renew the permission for admission of 4th batch of students in Ist MBBS course Basaveshwara Medical College, Chittradurga for the academic session 2004-05.

29. Dr. B.R. Ambedkar Medical College, Bangalore – Permission for admission of students in Ist MBBS course for the academic session 2004-2005.

Read : the inspection report (13th & 14th Sept., 2004) for permission for admission of students in Ist MBBS course for the academic session 2004-2005 at Dr. B.R. Ambedkar Medical College, Bangalore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the inspection report (13th-14th September, 2004) of Dr. B.R. Ambedkar Medical College, Bangalore and noted the following deficiencies.

1. (a) Shortage of teaching faculty is more than 15% as under:
 - (i) Professors-2 (Pharmacology-1, Community Medicine-1)
 - (ii) Assoc.Professors-9 (Anatomy-2, Physiology-3, Biochemistry-2, Forensic Medicine-1, Anaesthesiology-1)
 - (iii) Assistant Professors-8 (Physiology-1, Lecturer in Biophysics-1, Forensic Medicine-2, Lecturer in Epidemiology-1, Lecturer in Statistics-1, Surgery-1, Radiology-1)
 - (iv) Tutors-14 (Anatomy-2, Physiology-2, Pathology-1, Pharmacology-3, Forensic Medicine-1, Community Medicine-2, Radiology-3)
- (b) The shortage of Residents is more than 5% as under:
 - (i) Sr. Residents-2 (Surgery-2)
 - (ii) Jr. Residents-22 (TB & Chest-3, Psychiatry-3, Paediatrics-5, Surgery-10, Orthopaedics-1)
2. Clinical material is grossly inadequate as under:

	Daily Average		Day of inspection 13.9.2004	
OPD attendance	298		372	
Casualty attendance	10		15	
Number of admissions/discharge	22/28		45/15	
Bed occupancy %	57%		55%	
Operative work				
Number of major surgical operations	8		8	
Number of minor surgical operations	23		19	
Number of normal deliveries	1		2	
Number of caesarian sections	0-1		2	
Radiological investigations	OP	IP	OP	IP
X-ray	13	10	3	05
Ultrasonography	6	07	6	08
Special investigations	-	-	-	-
CT Scan	NA	NA	NA	NA
Laboratory investigations	OP	IP	OP	IP
Biochemistry	73	116	60	120
Microbiology	116	20	15	20
Serology	09	27	10	23
Parasitology	02	03	02	04
Haematology	25	25	30	25
Histopathology	-	12	-	15
Cytopathology	36	07	04	05
Others	NA	NA	-	-

3. Medical College has its own hospital i.e. Dr. B.R. Ambedkar Medical College Hospital. It has a total of 402 beds. It is also having affiliation with KC General Hospital which has 553 beds out of this 235 beds are under control of Principal of the medical college and are used for the teaching of the medical students of the college. However, the following deficiencies are observed in the distribution of units which is not as per Council norms:-
 - (A) Paediatric-3 Units
 - Unit II is having 22 beds instead of 30.
 - There are only 2 senior teachers.
 - Unit III is having 23 beds instead of 30.
 - There are only 2 senior teachers.
 - (B) OBG-2 units
 - Unit-I is having 45 beds instead of 30.
 - Unit 2 is having 50 beds instead of 30.
 - Orthopaedics-2 units-Unit composition is as per Council recommendation.
 - (C) ENT-2 Units
 - Unit I is having 20 beds.
 - Unit II is having 10 beds.
 - (D) Ophthalmology-2 Units
 - Unit 2 is having 15 beds.
 - (E) Dermatology-1 Unit
 - But 10 beds are in Dr. B.R. Ambedkar medical college hospital and 5 are in Govt. Hospital.
4. There are only 4 Operation Theatres against the requirement of 10.
5. In the ICCU, only central oxygen supply and suction are available. There are no other facility available. It is non-functional.
6. There are no facilities for colour doppler and CT Scan. 800 mA x-ray machine is not available.
7. There is no CSSD
8. All sterilization OT and other related departments is being undertaken at sterilization room which is attached to the main operation theatre . There are only one horizontal sterilizer and 2 vertical sterilizers. Out of which 1 vertical is non functional.
9. Paramedical staff is grossly inadequate as under:-
 - Laboratory Technicians-16
 - Laboratory Assistants-5
 - Laboratory Attendants-45
10. Nursing staff is grossly inadequate as under:-
 - Nursing Superintendent-2
 - Deputy Nursing Superintendent-1
 - Matron-1
 - Asstt.Nursing Superintendent-1
 - Staff nurses-69
11. Accommodation is available only for 192 boys and 237 girls i.e. 429 against the requirement of 500.
12. There is no separate residents hostel. They are accommodated in the boys and girls hostel.
13. Nursing hostel is in the campus and having only 25 rooms with total accommodation of 65 nurses which is inadequate.
14. There is no separate hostel for interns. They are accommodated in boys and girls hostel.
15. There are no staff quarters in the campus or outside the campus for the teaching faculty.
16. There is no central workshop.
17. Lecturer-cum-Medical Officer with MD (PSM) degree is not available in RHTC and UHTC.
18. Computerization of the Medical Record Section has not been done.
19. Casualty has only 12 beds. Resuscitation facilities are inadequate.
20. In Anatomy department, cold storage facilities are not available.
21. In Forensic Medicine, museum is not available and at present it is housed in the demonstration room.
22. Mortuary should be made fly proof.

23. In Pathology department provision of artificial light for use of microscope is not made. The departmental library has inadequate number of books.
24. Other deficiencies/remarks in the report.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council decided to reiterate its earlier decision not to make admissions in the 1st year of MBBS course for the academic session 2004-05 at Dr. B.R. Ambedkar Medical College, Bangalore.

30. Kempegowda Institute of Medical Sciences, Bangalore – Restoration of MBBS seats in 1st MBBS course for the academic session 2004-2005.

Read : the inspection report (13th & 14th Sept., 2004) for restoration of MBBS seats in 1st MBBS course for the academic session 2004-2005 at Kempegowda Institute of Medical Sciences, Bangalore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the inspection report (13th-14th September, 2004) of Kempegowda Institute of Medical Sciences, Bangalore and noted the following deficiencies.

1. Shortage of teaching staff is as under:

a) The shortage of teaching faculty is 9.5% (22/231)

- i) Professor – Nil
- ii) Associate Prof. – 1 (PSM)
- iii) Assistant Professor – 11 (Pathology –1, Microbiology –1, Pharmacology – 1, Forensic Medicine –1, TB & Chest –1, Radio Diagnosis –1, Anaesthesiology – 3, PSM –2)
- iv) Tutor – 10 (Physiology – 3, Biophysics –1, Pharmacology –2, Pharma Chemist –1, PSM –2, Radio Diagnosis – 1)

b) The shortage of Residents is 12.5% (8 out of 64) as under:-

- i) Sr. Resident –6 (Paediatrics –1, Obst. & Gynea. –2, General Medical –3)
- ii) Jr. Resident – 2 (TB & Chest)

2. Clinical Material is inadequate in terms of x-ray and Laboratory investigation as under:-

<u>Radiological Investigations</u>	O.P.	I.P.	O.P.	I.P.
X-ray	49	25	58	36
Ultrasonography	29	21	38	27
Special Investigations	1.5	3.5	3	2
C.T. Scan	7.5	4.5	6	3
<u>Laboratory Investigations</u>				
Biochemistry	138	222	136	200
Microbiology	10.5	8	12	8
Serology	45	35	42	32
Parasitology	9.5	8	8	4
Haematology	145	-	146	-
Histopathology	11	-	12	-
Cytopathology	7.5	-	7	-
Others	-	-	-	-

3. TV with Camera attachment is not available for the OTs.
4. Incinerator is not functional.
5. One lecture theatre of capacity of 80 seats and 3 lecture theatres of 120 seats available in the college and 2 lecture theatres of 120 students in the college are available which are inadequate. All the lecture theatres are level type, which is not permissible as per MCI norms.
6. Accommodation available for the students is only 400 against the requirements of 600. Separate accommodation for interns and residents is not available and they are accommodated in a part of UG hostel for total 60 interns residents which

is inadequate, as accommodation is to be provided for 120 interns and 114 residents i.e. total 234.

7. Accommodation for nurses is not available.
8. Staff quarters are not available.
9. Building :- The medical College is located in 2 different place separated by a distance of 4.5 kms. with pre-clinical departments of Anatomy, Physiology and Biochemistry are located separately in a build up area of 4,200 sq. mtr in a land of 6 acres which also houses the Pharmacy college runs the same management. Hostels for boys & girls is located right across this block in an area of 7094 sq. m. Hospital is spread over and area of 20488 sq. m. This land is occupied by the college of Dental Science, College of Nursing college of Physiotherapy, BIT and Engg. College, College of Science, College of Arts & Commerce, College of Law, Arts & Science & Pre University college running to a total students strength of 6650 at any given time.
10. Central Library – Library is located at 3 different places. One is at the basement of para-clinical building which functions as the main library, second one is located at the hospital building which is named as P.G. library and as text books and journals of clinical subjects only under the caption of individual clinical departments:- third library is located at the pre clinical block located 4.5 away and consists of all pre clinical subjects.
11. Health Center – PHCs – It is under the control of Karnataka State Government and the college is allowed to use its facility for teaching purposes. Accommodation for interns is available in a rented building and the rental agreement is valid till 2006. No messing facility are available. Lecture halls cum seminar room is not available. No audio visual aids has been provided. Deliveries are not conducted. UHC – The college utilize Banashankari Maternity Home run by the Municipal Corporation as UHTC located at a Administrative control of Municipal Corporation.
12. Hostels are located 4.5 kms away from the hospital cum para-clinical buildings and opposite to the pre-clinical block. No indoor games/Gymnasium are available.
13. Sports and recreation facilities : Ground is available but not leveled and being used.
14. Other deficiencies and remarks in the report.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council decided to reiterate its earlier decision to permit the institution to make 50 admissions in 1st year of the MBBS course for the academic year 2004-2005.

31. M.V.J. Medical College & Research Hospital, Bangalore - Renewal of permission for admission of fresh batch of students for the academic session 2004-2005.

Read : the compliance verification inspection report (14th Sept., 2004) for renewal of permission for admission of fresh batch of students for the academic session 2004-2005 at M.V.J. Medical College & Research Hospital, Bangalore.

The members of the Adhoc Committee and of the Executive Committee of the Council considered the compliance verification inspection report (14th Sept., 2004) and noted the following deficiencies : -

1. (a) The shortage of teaching faculty is about 9 % as under:

Professor	: 2	(Community Medicine:1, Radiodiagnosis: 1)
Asso. Prof.	: 5	(Biochemistry:1, Forensic Medicine:1, General Medicine:1, Paediatrics: 1, Dentistry: 1)
Asst. Prof.	: 3	(Anatomy-2, Pharmacology-1)
- (b) The shortage of Residents is 7% as under:

Sr. Resident	: 4	(Gen. Surgery-1, Anaesthesia -3)
Jr. Resident	: 2	(Psychiatry-1, Ophthalmology-1)

2. Available clinical material in the new teaching hospital is as under :-

	Daily Average	Day of Inspection
O.P.D. attendance	75-280	300
Casualty attendance	1-2	2
Bed Occupancy %	The hospital does not have indoor facilities presently except six bedded observational/casualty service from 8 to 6 p.m. only.	
<u>Operative Work</u> No. of major surgical operations No. of minor surgical operations No. of normal deliveries No. of caesarian Sections	Operation theatres are yet to be commissioned for surgery.	
<u>Radiological Investigations</u> X-Ray Ultrasonography Special Investigations C.T.Scan	Only one 100 MA mobile X-ray unit is available which is being established for routine use.	
<u>Laboratory Investigations</u> Biochemistry Microbiology Serology Parasitology Haematology Histopathology Cytopathology Others	One small OPD laboratory has been organized performing only routine urine, stool and blood examination and is manned by two technicians. No other service labs are existing in the college diagnostic departments.	

3. Rajiv Gandhi University of Health Sciences, Karnataka vide their letter ACA/M-27/O-4/2004-05, dated 11.08.2004 has consented to affiliate the college for the academic year 2004-05 for an intake of 100 students subject to the condition that the college should obtain permission by the Govt. of India, Ministry of Health & F.W., New Delhi u/s 10A of the IMC Act, 1956. An admission shall be made only after obtaining the final notification from the University.
The letter also states that college should also rectify the defects, appointment of adequate number of staff and establishment of own functioning hospital.
4. Presently the college is situated in a campus housing Engineering College, Polytechnic college and Nursing Institute in Whitefield area of Bangalore. This campus is of 20 acres. The college campus is not separately demarcated from other institutes and has administrative block, pre and para clinical blocks and other isolated units of different departments. The new college & hospital campus is located about 15 kms from the present campus. The civil construction work of the college and hospital building is not completed. The college and hospital are yet to be furnished and equipped with required equipments, etc. The college authorities have given an undertaking that both college and hospital will be made functional at the new site after 30th October.
5. The college has three pieces of land separated by National Highway-4 and approach road to village alongwith private agricultural properties in between.
6. The medical college, under construction, is located on a plot of 12 acres of land. The hospital building, under construction, is situated on another plot of 8 acres of land and a vacant unused plot of land of 6.28 acres is across the national highway road. All the land records about the ownership and possession were verified.

7. The residential quarters for staff and hostels for Residents, boys' and girls' are under construction.
8. The college is utilizing the clinical material and services of two Central Govt. hospitals (Hindustan Aeronautics Ltd. & Indian Telephone Industry) for teaching purposes only. There is no functional hospital of the college right from the inception. The new hospital building is under construction and as per the undertaking given by the college authorities, it would be made functional by 30th October.
9. As the college has no functional hospital, there is no Medical Record Section.
10. The new teaching hospital has recently started 4-5 OPDs, an observation cum casualty facility, one 100 mA mobile x-ray facility, small pathology laboratory and Central OPD registration counter without computer etc. OPD data were collected from manual records. All OPDs, wards, x-ray, other diagnostic departments and all other ancillary facilities are yet to be made functional.
11. Only 6 bedded observation/day care casualty facility has started which works from 8 a.m. to 6 p.m. has started. Facilities are grossly inadequate.
12. Examination hall at new college site is not available. The present available examination hall is not as per norms.
13. The final adoption formalities of RHTC is yet to be done. Most of work is being managed by Govt., doctors.
14. UHC is organized but the proof of students training at Centre was not available.
15. There are only two level type lecture theatres in present college site were shown with capacity of 100 each which is inadequate as per norms. In new medical college building required lecture theatres of gallery type are under construction. Audio visual aids are not provided.
16. There is a building of which ground floor is used as Girls hostel and First & second floor is used as Boys hostel. Boys hostel has got 39 rooms with capacity of 116. Girl's hostel has got 17 rooms with total capacity of 51. There is no intern, resident and nurses hostel in the campus. Thus accommodation is available only for 167 students which is grossly inadequate against the requirement of 350. It is inadequately furnished.
17. Residential Quarters:- In the Engineering premises in a building above a mess on the First floor, there are 13 rooms having attached toilet. These rooms have 2-3 bunk beds. There are no mattresses on these beds. There is gross deficiency of staff quarters in the campus.
18. Accommodation is available only for 50 residents against requirement of 100. It is in rented premises outside the campus at a distance of 7 kms which is not as per Council norms.
19. Accommodation is available only for 8 nurses which is grossly inadequate. It is in leased premises outside the campus.
20. College does not have its own functional hospital. Makeshift OPD has been created at new hospital site. On 26.5.2004.
21. Clinical laboratories are not available.
22. Operation theatres are not available.
23. No Intensive Care unit available.
24. No labour room available.
25. Small pharmacy for makeshift OPD is provided.
26. No Central Sterilisation department available.
27. No intercom facilities available.
28. No Central laundry is available.
29. Para-medical staff is grossly inadequate as under:-

Laboratory Assistants –	Nil
Laboratory Attendants –	25
Pharmacy –	02
Health Educator –	03
30. Nursing Staff is grossly inadequate as under:-

Nursing Superintendent –	1
Deputy Nursing Superintendent –	Nil
Matron –	1
Asstt. Nursing Superintendent –	Nil
Nursing Sisters –	Nil
Staff nurses –	42
31. Incinerator is not available.

32. No service department is available as hospital is non functional in campus.
33. Pathology museum is over crowded and needs to be expanded.
34. Mortuary is not present in the college. Post mortem is not done by Forensic Medicine Department.
35. In the Department of Paediatrics, teaching facilities are not available.
36. Other deficiencies/remarks in the inspection report.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate its earlier decision to recommend to the Central Govt. not to renew the permission for admission of fresh batch of students at M.V.J. Medical College, Bangalore for the academic session 2004-05. "

32. Sikkim Manipal Instt. of Medical Sciences, Gangtok – renewal of permission for admission of students for the academic session 2004-2005.

Read : the compliance verification inspection report (14th Sept., 2004) for renewal of permission for admission of students for the academic session 2004-2005 at Sikkim Manipal Instt. of Medical Sciences, Gangtok.

The Members of the Adhoc. Committee and of the Executive Committee of the Council noted the following deficiencies pointed out in the compliance verification report dated 14th September, 04:-

1. The overall shortage of teaching faculty is 22.8% (i.e. 27 out of 119)

- a) Professor : 4 (Biochemistry-1, Orthopadiatics-1, Paediatrics-1, Ophthalmology-1)
- Associate Professor : 8 (Anatomy-1, Pathology-1, General Medicine-2, General Surgery-2, Radiodiagnosis-1, Dermatology-1)
- Asst. Professor : 4 (Anatomy-1, Pathology-1, Lecturer Biostatistics -1, Pharma Chem.-1)
- Tutor : 11 (Pathology-5, Microbiology-1, Pharmacology-2, Forensic Medicine-2, Community Medicine-1)

b) Shortage of Residents is 57.8% (i.e. 49 out of 85) as under :-

- Sr. Residents : 20 (General Medicine –4, TB &Chest-1. Dermatology-1, Psychiatry-1, Paediatrics -1, General Surgery-1, Orthopaedics-2, Dermatology -1, Radiodiagnosis -3, Anaesthesia -5)
- Jr. Residents : 29 (General Medicine – 7, TB &Chest-1. Dermatology-1, Psychiatry-2, Paediatrics -3, General Surgery-5, Orthopaedics-3, ENT -1, Ophthalmology -1, OBG -5)

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

	CRH	
	Daily Average	Day of Inspection
O.P.D. attendance	138.07	73
Casualty attendance	8.69	04
Bed occupancy %	31.7%	33%

<u>Operative work</u>		
Number of major surgical operations	1.38	03
Number of minor surgical operations	0.8%	0
Number of normal deliveries	0.34	0
Number of caesarian Sections	0.34	0
<u>Radiological Investigations</u>		
X-ray	17.83	15
Ultra-sonography	0.4	0
C.T. Scan	1.23	1
<u>Laboratory Investigations</u>		
Biochemistry	80.61	98
Microbiology	9.02	5
Serology	8.06	1
Parasitology	2.07	0
Haematology	67.23	25
Histopathology	1.56	2
Cytopathology	0.92	0
Others		

3. The teaching hospital owned by the college i.e. C.R. Hospital has only 239 teaching beds against the requirement of 450 beds. The shortage of teaching beds is as under:

Department	Required	Available	Shortage
General Medicine and allied specialities			
General Medicine	102	38	64
Paediatrics	60	26	34
TB & Chest	15	8	7
Skin & VD	9	5	4
Psychiatry	9	8	1
Total	195	85	110
Surgery & allied specialities			
General Surgery	100	67	33
Orthopaedics	60	31	29
Ophthalmology	18	9	9
ENT	18	18	-
Total	196	125	71
Obst. & Gynac.			
Obst. & ANC	36	29	30
Gynac.	23		
Total	59		30
Grand Total	450	239	211

4. "The members of the Adhoc. Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council also noted the circular letter dated 4.5.2004 issued by the Govt. of India, Ministry of Health & F.W. which reads as under:-

NO.U.12012/12/94-ME(P)
Government of India
Ministry of Health & Family Welfare
Department of Health

To

Dated 4th May, 2004

The Health/Medical Education Secretaries
of all the State Govt./U./T. Administration

Sub:- Establishment of a new medical college – ownership of Hospital – Regarding.

Sir,

I am directed to say that one of the qualifying criteria prescribed in the Regulations of Medical Council of India to make an applicant eligible to apply to the Central Govt. for permission to establish a new medical college is that the “applicant owns and manages a hospital of not less than 300 beds with necessary infrastructural facilities capable of being developed into a teaching institution in the campus of the proposed college.”

It has been observed that availability of clinical material in the hospital attached to the newly established medical colleges has always been problem and one can't expect large scale bed occupancy during formative years. It even becomes more difficult for upcoming rural colleges to get the clinical material.

In the interest of teaching and training of students Govt. has decided that the authorities of new medical colleges may be permitted to utilize facilities of other Govt./district hospitals for the purpose of clinical material for teaching where beds of these hospitals should be under the total administrative control of authorities of concerned college and situated within 5 kms. from the medical college. The facilities of clinical material thus utilized shall be over and above the minimum beds stipulated under regulations of MCI. It is emphasized that any applicant for starting a medical college should own and manage 300 bedded hospital.

Further , such an arrangement of training of students be permitted for a period of three years from the date of grant of permission by the Central Government for establishment of a new medical colleges and during this period the concerned medical college should take necessary steps to make the clinical material available in the own hospital.

Yours faithfully,

(S.K. RAO)
DIRECTOR.

Copy for information to the Secretary, Medical Council of India, Kotla Road, New Delhi.

It was further noted by the Members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council that the three mandatory conditions prescribed in the above letter of Govt. of India have not been adhered to by the college as under:-

- a) The clinical material utilized as per the said letter shall be over and above the minimum beds stipulated under the Regulations of the Council. As per the Regulations 1999, for the minimum requirement of 100 admissions annually for the 3rd renewal i.e. admission of 4th batch, 450 beds are required against which the institute has only 239 beds in its own teaching hospital. Thus, there is a deficiency of 211 beds for the present stage.
- b) As per the said letter, such an arrangement of training of students can be permitted for a period of 3 years for grant of permission by the Central Government for establishment of new medical college and during this period the concerned medical college is expected to take necessary steps to make the clinical material available in the hospital. 3 batches in this college have already been admitted and therefore the institute is not eligible for the said benefit of the arrangement.
- c) The authorities of the new medical college are permitted to utilize the facilities of the district hospital for the purpose of clinical material for teaching where beds of these hospitals should be under the total administrative control of the authorities of concerned college. The STNM hospital, which the institute has proposed to

utilize the facilities for the purpose of clinical material is under the administrative and financial control of District Health Authorities of the Govt. of Sikkim and not under the Administrative and financial control of the Dean of the Sikkim Manipal Institute of Medical Sciences. It was also further noted that the staff of the college does not participate in any teaching activities for the STNM Govt. Hospital. It may be noted that no separately demarcated teaching beds are available in the STNM Hospital for the faculty of SMIMS. The entire patients care in this hospital is done by the staff of STNM Hospital only. It is also noted that the STNM Hospital doctors do not contribute to the patient care management in the CR Hospital of SMIMS.

Considering all these above issues it was decided by the members of the Adhoc Committee and of the Executive Committee of the Council that the staff as well as clinical material of the STNM hospital cannot be considered for Sikkim Manipal Medical College for the present stage.

5. 16 two seater rooms and 2 four seater rooms and 1 single seater room are available on the 8th floor for the residents thus creating accommodation for 41 residents, which is inadequate against the requirement of 100. 32 two seater rooms and 5 four seater rooms are available on the 9th Floor for the nurses thus creating an accommodation for 84 staff nurses, which is inadequate.
6. The paramedical staff is inadequate, which is as under :-

Laboratory Technicians	:	35
(including Jr. Tech. & Tech. Asstt.)		
Laboratory Assistants	:	10
Laboratory Attendants	:	-

7. The UHC and the PHC are under the administrative and financial control of Sikkim Govt. as per the MoU with the Sikkim Govt. Position is status quo.
8. There is no speech and hearing therapist in either of the hospital.
9. Nursing staff is still inadequate as under:-

Nursing Superintendent	-	1
Deputy Nursing Suptd.	-	1
Matron	-	Nil
Asstt. Nursing Suptd.	-	1
Nursing Sisters	-	10
Staff Nurses	-	97

10. Other deficiencies/remarks are in the report.

In view of above the members of the Adhoc. Committee and of the Executive Committee of the Council decided to reiterate its earlier decision to recommend to the Central Government not to renew the permission for admission of fresh batch of MBBS students at Sikkim Manipal Instt. of Medical Sciences, Gangtok for the academic session 2004-2005.”

33. M. M. Instt. of Medical Sciences & Research, Mullana – Renewal of permission for admission of 2nd batch of students for the academic session 2004-05.

Read : the compliance verification inspection report (15th Sept., 2004) for renewal of permission for admission of 2nd batch of students for the academic session 2004-2005 at M.M. Institute of Medical Sciences & Research, Mullana.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (15th September, 2004) and decided to recommend to the Central Govt. to renew the permission for admission of 2nd batch of 150 students in the 1st MBBS course for the academic session 2004-05 at M.M.Instt. of Medical Sciences & Research, Mullana.

34. Christian Medical College, Dichpalli – Renewal of permission for admission of 2nd batch of students for the academic session 2004-05.

Read : the compliance verification inspection report (15th Sept., 2004) for renewal of permission for admission of 2nd batch of students for the academic session 2004-2005 at Christian Medical College, Dichpalli.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance verification inspection report and noted the following deficiencies:-

1. NTR University of Health Sciences, Vijayawada, A.P., has affiliated the college for the academic years 2003-04. It is valid up to 2003-04 vide letter No.1604/A2/99 dt. 25-07-03. Affiliation for 2004-2005 is not yet available.
2. (a) The shortage of teaching faculty is 64% as under:-
 - i) Professor – 13 (Anatomy –1, Physiology –1, Bio-chemistry –1, Pathology –1, Microbiology –1, Pharmacology –1, Forensic Medicine –1, Community Medicine –1, General Medicine –1, General Surgery –1, Orthopaedics –1, Radio – Diagnosis –1, Anaesthesiology –1)
 - ii) Associate Professor – 18 (Anatomy –2, Physiology –2, Bio-chemistry – 1, Pathology – 3, Microbiology –1, Pharmacology –1, Forensic Medicine –1, General Medicine –1, Paediatrics –1, General Surgery –1, Orthopaedics – 1, Obst. & Gynae. –1, Radio – Diagnosis –1, Anaesthesiology –1)
 - iii) Assistant Professor – 24 (Anatomy – 3, Physiology –2, Pathology – 2, Microbiology –1, Pharmacology –2, Community Medicine –1, General Medicine –2, TB & Chest –1, Derma. Ven. & Leprosy –1, Psychiatry –1, Paediatrics –1, Orthopaedics –1, Oto-Rhino-Laryngology –1, Obst. & Gynae. –2, Radio – Diagnosis –1, Anaesthesiology –2)
 - iv) Tutor – 10 (Physiology –2, Bio-chemistry –1, Pathology –3, Pharmacology –2, Anaesthesiology –2)
- b) The shortage of residents is more than 25 % as under:-
 - i) Sr. Resident – 18 (Gen.Med.-4, Paed. –2, Gen. Surg. –4, Orthopea.-2, Oto-Rhino-Laryngology –1, Ophthalmology –1, Obst. & Gynae-2, Aneas.-2)
 - ii) Jr. Resident – 3 (T.B.& Chest –1, Obst & Gynae.-2)
3. The Clinical Material is grossly inadequate as under:-

	Daily Average		Day of Inspection	
O.P.D. attendance	350		200	
Casualty attendance	2-3		1	
Number of admissions / discharge	3-4		2/1	
Bed occupancy%	40%		30%	
<u>Operative work</u>				
Number of major surgical operations	3-4 per day		1	
Number of minor surgical operations	4-5 per day		2	
Number of normal deliveries	0-1		Nil	
Number of caesarian Sections	0-1		Nil	
<u>Radiological Investigations</u>				
	O.P	I.P.	O.P.	I.P.
X-ray	10	6	6	2
Ultrasonography	4-5	1	10	1
Special Investigations	-	-	-	-
C.T. Scan	-	-	-	-

<u>Laboratory Investigations</u>	12		10	
Biochemistry	6		5	
Microbiology	-		3	
Serology	-		-	
Parasitology	2		-	
Haematology	2		-	
Histopathology	-		-	
Cytopathology	30		20	
Others				

4. Statistical unit is yet to be made functional.
5. The college Council is yet to be constituted.
6. There are only two lecture theatres in the college which is inadequate as per norms.
7. Examination hall is not available.
8. No Veterinary surgeon is available. There is no place for experimental work in the animal house.
9. Total measurement of the Central Library is not available. Total number of books available are 1456. Journals with back numbers are not available. The Institution has not subscribed for any journals for the year 2004-05. Only one Library Assistant is available. Facilities like Medlar, Internet, Photo copier, computers etc. are not available.
10. Space is available for Central Photography cum audiovisual units but no equipments and staff are available. Only dark room is available.
11. Hostel accommodation is available only for 102 students against requirement of 200.
12. Resident hostel is not available.
13. There is no separate nursing hostel. The resident hostel is being converted into nurses hostel. Only electrical fittings are done and nothing else is available in the building.
14. Residential quarters are grossly inadequate.
15. Indoor registration counter is not computerized. Records are not maintained in proper order in the medical records section. ICD X classification is not yet followed.
16. Only 10 beds are available in the casualty. Only 1 pulse oxymeter and 1 crash cot are available. No other resuscitation equipment is available. Central Oxygen, central suction and central nitrous oxide are not available. Duty roster is not available. Facilities for preanaesthetic and postanaesthetic care are inadequate.
17. Only 2 OTs are functional against the requirement of 6. Central Oxygen, central suction and central nitrous oxide are not available. Postoperative recovery room is not available.
18. There is combined ICCU and ICUs. Separate ICUs for various departments are not available.
19. Labour room beds are not functional.
20. Protective measures as per BARC specifications are not available for all the staff members in the radiology department.
21. Only one diploma holder is available for the entire hospital pharmacy. No other qualified staff is available in the Pharmacy.
22. CSSD has got 2 big vertical and 3 small autoclaves. No other equipment are available.
23. There is no intercom facility and there is no phone connection to many departments and wards.
24. Mechanized laundry is not available.
25. Kitchen is not available.
26. Nursing staff is grossly inadequate as under:
 - (a) Nursing Superintendent: 2
 - (b) Deputy Nursing Superintendent: 5
 - (c) Staff Nurses: 44
27. There is no band saw and no functional research laboratory in the Anatomy department.
28. There is no functional research laboratories in Physiology and Biochemistry departments.

29. The second floor of the college is designated for the departments of Pathology, Microbiology, Forensic Medicine and Community Medicine. For all these departments space is inadequate as per Council norms. Museum and research laboratories are very small and inadequate. No demonstration rooms are in existence.
30. Only 1 Tutor is available in the department of Community Medicine. Activities of this department are yet to start.
31. In the clinical departments, space is not provided for all the staff members to sit and work.
32. Non teaching staff is grossly inadequate in all the departments.
33. Other deficiencies/remarks in the main report.

In view of the above, the member of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate its earlier decision to recommend to the Central Govt. not to renew the permission for admission of 2nd batch of students in the 1st MBBS course at Christian Medical College, Dichpalli for the academic session 2004-2005.

35. K.J. Somaiya Medical College, Mumbai – Renewal of permission for admission of 4th batch of students against the increased intake i.e. 50 to 100 for the academic session 2004-05.

Read : the compliance verification inspection report (15th Sept., 2004) for renewal of permission for admission of 4th batch of students against the increased intake i.e. 50 to 100 the academic session 2004-2005 at K.J. Somaiya Medical College, Mumbai.

The Executive Committee noted that an inspection to verify the compliance submitted by the College authorities of K.J. Somaiya Medical College, Mumbai was carried out by the Council Inspectors on 15th Sept., 2004 and the compliance verification inspection report was considered by the Executive Committee at its meeting held on 21.9.2004 where the members of the Adhoc Committee appointed by the Hon'ble Supreme Court were also present. The decision of the Committee arrived at is recorded as under for your information & necessary action:-

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

a) Faculty 8.5% (i.e. 11 out of 128)

- | | | |
|----------------------|---|------------------------------------------|
| i) Professor | : | 1 (Biochemistry) |
| ii) Assoc. Professor | : | 2 (Forensic Medicine-1, Dentistry-1) |
| iii) Asst. Professor | : | 3 (Anatomy) |
| iv) Tutor | : | 5 (Pharmacology-2, PSM-1, Anaesthesia-2) |

b) Resident 25% (i.e. 19 out of 76)

- | | | |
|-----------------|---|----|
| i) Sr. Resident | : | 19 |
|-----------------|---|----|

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

	Daily Average	Day of Inspection
O.P.D. attendance	669	290
Casualty attendance	63	36
Bed occupancy%	72%	70%

<u>Operative work</u>				
Number of major surgical operations	15		5	
Number of minor surgical operations	5		2	
Number of normal deliveries	6		2	
Number of caesarian Sections	1		Nil	
<u>Radiological Investigations</u>				
	O.P.	I.P.	O.P.	I.P.
X-ray	47	29	27	8
Ultrasonography	26	10	12	3
Special Investigations	2	1	-	-
C.T. Scan	0.8	1	02	-
<u>Laboratory Investigations</u>				
Biochemistry	230	242	194	144
Microbiology	86	99	85	71
Serology	5	14	-	10
Parasitology	24	8	Nil	17
Haematology	2	2	7	2
Histopathology	105	111	100	42
Cytopathology	Nil	7	1	2
Others	8	1	1	-
			-	-

3. OPD needs more space. Space provided to each speciality is inadequate. By and large all OPDs are located in one central room where two or three consultants can sit and take history of the patients and there are 3 to 4 small cabins for examination of patients. There is no privacy to the patient while taking history.

4. The Female psychiatry ward is not having any protection/grill fitted in big windows opening directly outside.

Ward for female patients is a big hall which is divided by incomplete partitions to make General Medicine ward. Patients and patients' relatives can freely move from one place to another in these wards.

5. Departmental library of ENT, Ophthalmology and psychiatry are still housed in the OPD.

6. Auditorium located at a distance of 1 ½ kms. away from the building of the information technology college which is owned by the trust. It has 600 seats.

7. Veterinary Officer on part time.

8. Total accommodation available for undergraduate students is 84 as against the requirement of 400 as under :-

a) **Boys' Hostel** – Boys' hostel is at a distance of 1 ½ kms. having a 3 storied building with 5 rooms on each floor. Two rooms on ground floor are accommodated by the Warden. Each floor is having one big room accommodating 6 boys. Ground Floor - 12 students, 1st Floor – 18 students, 2nd Floor – 18 students, Total – 48 students are occupying on the day of inspection. No gymnasium and no recreation facilities are available.

b) **Girls' Hostel** - There is a Girls' hostel at Vidyavihar which is 4 kms. away from the college. There are 12 triple seats room. Total accommodation available is 36.

9. **Interns Hostel** : Interns Hostel is on the 7th floor of I.T. building and ½ km. away from the college. Six triple seated and six double seated rooms are available. Total accommodation available is 30 against the requirement of 100.

10. **Residential quarters** – Only 3 flats are available in the Harshad Apartments located ½ km away from the college. No other accommodation is available. No accommodation for class II and IV employees.

11. Medicine Unit I is having 2 Senior Teachers as against the requirement of 3.

12. Central Casualty Services – Total 12 beds are available in casualty area against requirement of 20.

13. ICU is common for medical, surgical and cardiac patients. There is no separate ICCU.

14. There is no cooling cabinet in Anatomy Department.

15. In Pathology, there is one demonstration room with a capacity of 30 seats, which is inadequate.
16. There is no Mortuary. Students attend Postmortem at Sion Hospital, Mumbai as Govt. is not giving permission to conduct postmortem.
17. Institution runs School of Nursing and College of physiotherapy and for running these institutions, additional staff and infrastructure are not provided.
18. Books available in Departmental library are inadequate as under :-

Skin & VD	-	56
Psychiatry	-	59
Radiology	-	26
Anaesthesia	-	70

19. Lecture Theatres are not as per norms. There are 5 lecture theatres, out of which 4 are gallery type and 1 level type. Seating capacity of two lecture theatres is 100 students each, other two lecture theatres is of 150 students each and one is of 400 students.
20. Journals subscribed 80 (55 Indian and 25 foreign) against the requirement of 70 Indian and 30 Foreign.
21. Experimental Pharmacology laboratory has a capacity of only 56.
22. There are only 9 microscopes in the students' laboratory in the Department of Community Medicine.
23. Other deficiencies/remarks are in the main report.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate its earlier decision to recommend to the Central Govt. not to renew the permission for admission of 4th batch of MBBS students against the increased intake i.e. 50 to 100 at K.J. Somaiya College, Mumbai for the academic session 2004-05.

36. Kurnool Medical College, Kurnool – Renewal of permission for admission of students against the increased intake i.e. 130 to 150 for the academic session 2004-2005.

Read : the compliance verification inspection report (17th Sept., 2004) for renewal of permission for admission of students against the increased intake i.e 130 to 150 for the academic session 2004-2005 at Kurnool Medical College, Kurnool.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (17th September, 2004) alongwith the letter dated 15.7.2004 from the Joint Secretary, Govt. of India, M/o Health & FW and decided to recommend to the Central Govt. to renew the permission for admission of fresh batch of MBBS students against the increased intake i.e. 130 to 150 for the academic session 2004-05 at Kurnool Medical College, Kurnool.

37. Kakatiya Medical College, Warangal – Renewal of permission for admission of students against the increased intake i. e. 100 to 150 for the academic session 2004-2005.

Read : the compliance verification inspection report (17th Sept., 2004) for renewal of permission for admission of students against the increased intake i.e. 100 to 150 for the academic session 2004-2005 at Kakatiya Medical College, Warangal.

“The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (17th September, 2004) alongwith the letter dated 15.7.2004 from the Joint Secretary, Govt. of India, M/o Health & FW and decided to recommend to the Central Govt. to renew the permission for admission of fresh batch of MBBS students against the increased intake i.e. 100 to 150 for the academic session 2004-05 at Kakatiya Medical College, Warangal”.

45. Proforma for obtaining details from the complainant.

To consider the proforma prepared for obtaining details from the complainant.

The Members of the Executive Committee and of the Adhoc Committee deliberated upon the issue and decided to approve the proforma for obtaining details from the complainant.

49. Approval of the Minutes of the meetings of the Building Committee held on 4.8.2004 & 6.9.2004.

Read : Minutes of the Building Committee Meetings held on 4.8.2004 & 6.9.2004 and the letter from M/s. Sacred Constructions Pvt. Ltd. Dated 20.09.2004

The Members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court approved the Minutes of the meetings of the Building Committee held on 4.8.2004 & 6.9.2004.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council also considered the letter dated 20.09.2004 from M/s. Sacred Construction Pvt. Ltd.- i.e. the lowest bidder, the operative part of which reads as under:-

- "1. We revise our original rebate of 1.2% to 3.6% (Three point six percent) on our quoted rates.
2. Deletion of sub-head XIV of Fire Doors on the page 134-135 of tender from our scope of work.
3. Restrict the rates of all AHR items for quantities beyond the stipulated quantities of the tender to the enhanced DSR rates with present cost Index+25% above except item no. 3 of SH RCC & item no. 1&2 of SH VI steel work, item no. 9&10 of SH IX finishing & item no. 8 of SH XI Misc. works & item no. 4 of SH IV External Sewage & storm water drainage ; which shall be done on quoted rates only.
4. The rates of ALR items are restricted for quantities stipulated in the tender document. For quantities beyond the tender quantities shall be done on new rates.
5. We agree to work above RCC columns casted by M/s. Uppal Engg. Co. Pvt. Ltd. & are satisfied with the quality of the same.

In view of above, the members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to award the contract for the construction of Housing cum Guest House Complex for MCI in Sector 8, Pocket 14, Dwarka, New Delhi to the lowest bidder i.e. M/s. Sacred Constructions Pvt. Ltd. at a price of Rs. 2,11,54,336/- as quoted originally as reduced after discount offered by them.

51. R.D. Gardi Medical College, Ujjain- Renewal of permission for admission of 4th batch of students for the academic session 2004-2005.

Read : the compliance verification inspection report (11th Sept., 2004) for renewal of permission for admission of 4th batch of students for the academic session 2004-2005 at R.D. Gardi Medical College, Ujjain.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance verification inspection report (11.9.2004) and noted as under:-

1. (I) The following teaching faculty are not available:-
 - (a) Professor : 3 (Microbiology-1, Community Medicine-1, Radio-Diag.-1)
 - (b) Assoc.Prof.: 5 (Anatomy-1, Physiology-1, Biochemistry-1, TB&Chest-1, General Surgery-1)
 - (c) Tutor:2 (Pharmacology –1, Anaesthesia-1)
- (II) It is also pertinent to note that the following teachers who have been employed by this college as teaching faculty members are not qualified to hold

the post because of lack of adequate teaching experience as required as per Council Regulations:

Name	Department	Designation	Experience required as per Council regulations	Experience shown
<u>Dr. A.V. Mutalkar</u>	Surgery (Cardio-Thoracic)	Professor	As Reader/ Associate Prof. in Surgery for four years in a recognised medical college	Experience & column of previous employment is shown for Cardio-thoracic Surgery which is not an undergraduate department. Professor of Surgery (Cardio-thoracic) which is not as per Council norms.
<u>Col. Dr. M.L. Verma</u>	Community Medicine	Assoc. Professor	As Assistant Professor/ Lecturer in Community Medicine for five years in a recognised medical college.	Experience as Assistant Professor not shown in D.F.. The experience is in Administrative position as in AMC.
<u>Dr. Col. G. Vyas</u>	Medicine	Associate Professor	As Assistant Professor/ Lecturer in Medicine for five years in a recognised medical college.	Experience as Asstt. Professor not shown. Experience shown is as Classified Specialist which is not as per norms.
<u>Dr. Arjun Kumar Asudani</u>	Anaesthesiology	Associate Professor	As Assistant Professor/ Lecturer in Anaesthesiology for five years in a recognised medical college.	Experience shown in D.F. submitted at this inspection is different. In the previous form, experience is shown as Tutor/ Demonstrator from 1976 to 1992 at GMC, Bhopal while in the present form, for the same period, it is shown as Assistant Professor at GMC, Bhopal and S.S. Medical College, Rewa. No certificate or proof is submitted for this.
<u>Dr. S.K. Rathi</u>	Paediatrics	Assistant Professor	Requisite recognised postgraduate qualification in Paediatric. Three years teaching experience in Paediatric in a recognised medical college	The experience shown in two declaration forms is different. In the previous declaration form it is shown as Tutor/ Resident at G.R. Medical College, Gwalior from 1983 to 1985 i.e. two years. In the present D.F. it is shown at G.R. Medical College, Gwalior from 1982 to 1985. No certificate or proof submitted for this additional experience.
<u>Dr. Shivaswamy M.S.</u>	Community Medicine	Assistant Professor	Requisite recognised postgraduate qualification in Community Medicine. Three years teaching experience in Community Medicine in a recognised medical college	The experience shown in two declaration forms is different. In the previous declaration form it is shown as Tutor/ Resident at M.G.M. Medical College, Indore from 1999 to 2002 i.e. three years. In the present D.F. the experience as Tutor/Resident has not been shown.

(III) In view of above, the total shortage of teaching faculty is approximately 13% as under:-

(a) Professor : 3 (Microbiology-1, Community Medicine-1, Radio-Diag.-1)

(b) Assoc.Prof.: 9 (Anatomy-1, Physiology-1, Biochemistry-1, Community Med. – 1, General Medicine –1, TB&Chest-1, General Surgery-2, Anaesthesia-1)

(c) Asstt.Prof. : 2 (Paediatrics-2)

(d) Tutor:2 (Pharmacology –1, Anaesthesia-1)

(IV) As per Minimum Requirement Regulations for 100 admissions, Sr. Resident should have 3 years experience in the concerned department. The shortage of Residents is 14% (10 out of 70) as under:-

(a) Senior Resident – 9 (General Medicine-3, Paediatrics-1, General Surgery-1, Dermatology –1, ENT-1, Psychiatry-1, TB&Chest-1)

(b) Junior Resident – 1(General Medicine)

2. Clinical material is inadequate in terms of number of deliveries and investigations at the teaching hospital in the campus.
3. No separate CSSD is available in the teaching hospital in the campus. Deficiency remains as it is.
4. No equipment is available in ICU in the teaching hospital in the campus. Deficiency remains as it is.
5. Renewal of license of blood bank is not received. The arrangement of having blood bank away from teaching hospital is not as per norms.
6. Accommodation for boys and girls at RHTC is under construction.
7. Ramp is under construction in the hospital. No lift is available.
8. There is no central oxygen in casualty. Resuscitation equipment is inadequate.
9. C.R. Gardi Hospital which is in the college campus has 435 teaching beds against the requirement of 450 teaching beds. However, there is a shortage of 22 teaching beds as under:-

Department	Required	Available	Shortage
Medicine	102	92	10
Paediatrics	60	52	8
Ophthalmology	18	16	2
ENT	18	16	2

10. Other deficiencies/remarks are in the report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate its earlier decision not to renew the permission for admission of 4th batch of students at R.D. Gardi Medical College, Ujjain for the academic year 2004-2005.

52. Govt. Medical College, Anantapur - Renewal of permission for admission of 4th batch of students for the academic session 2004-2005.

Read : the compliance verification inspection report (17th Sept., 2004) for renewal of permission for admission of 4th batch of students for the academic session 2004-2005 at Govt. Medical College, Anantapur.

The members of the Adhoc. Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance verification inspection report 17th Sept., 2004, letter of the Principal-Secretary, Health Medical & Family Welfare Department, Govt. of Andhra Pradesh as forwarded by Govt. of India vide letter dated 21.9.2004 alongwith the letter dated 15.7.2004 from the Joint-Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to renew the permission for admission of 4th batch of 100 students in Ist

MBBS course at Govt. Medical College, Anantapur for the academic session 2004-2005.

53. Subharati Medical College, Meerut- Renewal of permission for admission of 5th batch of students for the academic session 2004-2005.

Read : the compliance verification inspection report (17th Sept., 2004) for renewal of permission for admission of 5th batch of students for the academic session 2004-2005 at Subharati Medical College, Meerut.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (17th September, 2004) and decided to recommend to the Central Govt. to renew the permission for admission of 5th batch of 100 students in the 1st MBBS course for the academic session 2004-05 at Subharati Medical College, Meerut.

54. S.C.B. Medical College, Cuttack – Renewal of permission for admission of 2nd batch of students against the increased intake i. e. 107 to 150 for the academic session 2004-2005.

Read : the compliance verification inspection report (17th Sept., 2004) for renewal of permission for admission of 2nd batch of students against the increased intake i.e. 107 to 150 for the academic session 2004-2005 at S.C.B. Medical College, Warangal.

The members of the Adhoc. Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance verification inspection report 17th Sept., 2004 and noted the following deficiencies:-

1. (a) Shortage of teaching faculty is 13.8%.
 Professor-1 (Forensic Medicine-1)
 Associate Professors-22 (Anatomy-1, Physiology-2, Pharmacology-1, Microbiology-2, Forensic Medicine-1, Medicine-1, Paediatrics-4, Psychiatry-1, General Surgery-5, Obst. & Gynae-3, Radiology-1)
 Assistant Professor-6 (Anatomy-2, Physiology-1, Microbiology-2, Prev. & Social Medicine-1)
 Tutors-5 (Physiology-2, Pharmacology-2, Microbiology-1)
- (b) Shortage of Residents is 13.5% as follows:-
 Sr. Residents-7 (General Surgery-4, Radiology-2, Medicine-1)
2. There is no Central Animal House. The animal house is located in the department of Microbiology and Pharmacology. The Veterinary Officer is appointed on weekly basis.
3. The deliveries are not conducted at UHC since Medical College Hospital is at 1.5 kms. distance.
4. Accommodation for Residents and Nurses are inadequate as under:

Hostel	No.	Rooms	Capacity	Furnished Yes/No	Mess Yes/No
Residents	1	22	44	Yes	Yes
Nurses	2	40+40	40+60	Yes	No

5. There is no common registration counter in the OPD. The waiting areas are available near these and the waiting counters but these areas are inadequate. Benches are required in the waiting areas need to be enlarged. Most of the OPDs do not have adequate number of examination rooms. The teaching areas in most of the OPDs are not available or are inadequate. OPDs are over crowded.
6. The audiometry room is air conditioned but is not adequately sound proof.

7. Registration section in the OPDs are not computerized. Indoor registration counter is not computerized and not cross linked with outdoor registration numbers. Medical record room is also not computerized.
8. Staff in the medical record is inadequate. They are not trained in medical record technology.
9. Casualty needs to be equipped with more resuscitation equipment.
10. There is no Microbiology section in the central laboratory.
11. No bowl sterilizer, no Glove inspection machine and no instrument washing machine in CSSD. The receiving and distribution points are not separate.
12. The mechanized laundry system is partially operating which is supplemented by engaging 22 dhobies.
13. There is no central kitchen. In place of the cooked food only packed 300 ml milk, 2 eggs and 200 gms of biscuits, bread are supplied.
14. Nursing staff is inadequate for total 1150 beds as under:

Matron	2
Asstt. Nursing Supdt/Asstt. Matron	2
Nursing sisters	40
Staff nurses	267

15. Students have not been provided the locker facility.
16. The gas cylinders need to be kept away in a separate enclosure in the department of Biochemistry. There is no separate seminar room cum library.
17. The demonstration room does not have adequate number of seats i.e. 75 to 100. Practical laboratory does not have required 90 workplaces (only 40 available).
18. There is no separate histopathology students laboratory.
19. There are no separate demonstration room. Practical laboratory is shared with Pathology. There is no separate library.
20. The Microbiology museum is shared with the Pathology department.
21. Other deficiencies/remarks in the report.

In view of above the members of the Adhoc. Committee and of the Executive Committee of the Council decided to reiterate its earlier decision to recommend to the Central Government not to renew the permission for admission of 2nd batch of MBBS students against the increased intake i.e. 107 to 150 at S.C.B. Medical College, Cuttack for the academic session 2004-2005.

55. S.V. Medical College, Tirupati – Renewal of permission for admission of students against the increased intake i. e. 100 to 150 for the academic session 2004-2005.

Read : the compliance verification inspection report (17th Sept., 2004) for renewal of permission for admission of students against the increased intake i.e. 100 to 150 for the academic session 2004-2005 at S.V. Medical College, Tirupati.

“The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive of the Council considered the compliance verification inspection report (17th September, 2004) alongwith the letter dated 15.7.2004 from the Joint Secretary, Govt. of India, M/o Health & FW and decided to recommend to the Central Govt. to renew the permission for admission of fresh batch of MBBS students against the increased intake i.e. 100 to 150 for the academic session 2004-05 at S.V. Medical College, Tirupati”.

56. Extension of service of Dr. C. A. Desai as Zonal Inspector on consolidated salary.

Read : The matter with regard to extension of service of Dr. C. A. Desai as Zonal Inspector on consolidated salary.

The Members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted that the services of Dr. C. A. Desai as Zonal Inspector is going to expire on 01.11.2004. The Committee decided to extend the services of Dr. C. A. Desai for a period of one year i.e. upto 01.11.2005.

**{Lt. Col. (Retd.) Dr. ARN Setalvad}
SECRETARY**

New Delhi,
Dated the 21st September, 2004

A P P R O V E D

**(DR. P.C.KESAVANKUTTY NAYAR)
PRESIDENT (ACTING)**