## MEDICAL COUNCIL OF INDIA

# ASSESSMENT FORM FOR \_150\_ - MBBS ADMISSIONS REPORT

(INCREASE IN ADMISSION CAPACITY FROM \_\_\_\_\_ TO \_\_\_\_\_)

Verification of Compliance Part - A-III (<u>2019-20</u>) (to be filled by the Assessors)

1.1	1.	Type o	f Assessment
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Signature of Assessors

U/S 10A-regular/complian	ce: Lette:	r of Permission(	) 1st repoved/	\ O1			
U/S 10A-regular/complian U/S 10A-Increase Admission	n Cana	oite D. I.	//1 Terlewai(	), <sup>2nd</sup> renewal (	),3 <sup>rd</sup> renewal (	),4th renewal (	)
U/S $10$ A-Increase Admissio $3^{ m rd}$ renewal ( $$ ), $4^{ m th}$ renewal	( )	-ity:Regular/Co	mpliance: Letter	r of Permission(	),1st renewal(	), 2 <sup>nd</sup> renewal(	),
U/S 11- Recognition - Regu	lar/Com	pliance				`	,,
Continuation of Recognition			00 (1)				
Any Other:		- / Compliant	ce ( v )				
	<u>.</u> .						
Name of the Institution	1:	Chandulal Chandra	kar Memorial Mod	. 10			
Address	1: 1	Kachandur, Durg		ical College, Durg			
Telephone No.					Z*		$\exists$
	:   C	788 - 6006061/62		· · · · · · · · · · · · · · · · · · ·			

Date

E-mail	:	cmmedicalcolleg	ge@gmail.com	
College Website:	" (	www.cmmedica	lcollege.com	
Council Letter No. & Date	:	DI/2018/03986 I	Dated 28-04-2018	
Assessment Date:	08 A	pril 2019	Last Assessment Date:	09th 10th April -2018
PG Courses	:	Yes/No √		

### 3. Particulars of Assessors

Name of the Assessors	Correspondence Address	Contact No.	Email
Dr. Rekha Sonawane	Prof. & HOD Community Medicine, Gadag Institute of Medical Sciences, Gadag, Karnataka.	9916191127	drrekha.sonavane@gmail.com
Dr. Shamshad Beegum T.S.	Prof. & HOD Anaesthesiology, Govt. Medical college, Manjeri, Kerala	9446505513	beegumshamshad8@gmail.com

4. Verification of compliance submitted by institute:

Signature of Assessors

Date 8 / 4 / 19

Signature of Dean/Principal

DÉAN Chandulal Chanárakes Memorial Medical College, Kachandur, Dutg (C.G.)

Sr. No.	Deficiencies reported from GOI/MCI	Compliance by College sent to GOI/MCI	Remarks of the Assessors after the assessment
1	Shortage of Residents is 13.75 %	<ol> <li>All the Senior and Junior Residents are appointed in our College as per MCI norms.</li> <li>Only 4 resident doctors who were on night duty reported late on the day of assessment were not counted towards deficiency.</li> <li>Senior Resident in Paediatrics, 1 In Psychiatry, 1 in Respiratory Medicine, 1 in Surgery and 2 in Opthalmology have not been counted due to other reasons.</li> </ol>	
2	All the residents are not staying in the hostel.	Resident Hostel having 90 rooms with capacity of 180. All residents are staying in that hostel. Some of the resident of local Durg-Bhilai go home on Sunday with due permission of HOD of respective department.	All residents are staying in the hostels. Boys and girls are having separate hostel with capacity of 90 rooms with 180 beds. 40 rooms for Girls and 50 for boys.
	residents knew anything about patients of	The admission in various partments are under unit system	The residents knows regarding the patients as they all are completed internship on 31 <sup>st</sup> of March 2019 from the this college itself.

Date 8 4 10

Signature of Deap Principal

Charlical Temperatur Habatile Medical College I polygomy (July 1) por

working regularly& have presented	ite possible the residents may	
themselves just for assessment.	t be aware of the details of	
	tients admitted under other	
	its.	·
Bed occupancy of patient on the day of	Bed occupancy of patients on	The bed occupancy was around 65% in all ward
assessment at 11.15 am was 49.23 %. If 20	the day of assessment at 10:21	
non-genuine patients are to be excluded, it	AM was 79.87%.	••
comes to 44.23 % as detailed in the report.		
	Details of clinical material is	•
	enclosed.	
Patients –(i) General Medicine – during	Bed occupancy of patients on	The bed occupancy on day of assessment was
round of the assessor at 11.15 am on 9-4-	the day of assessment was	almost 65% in all wards except Paediatrics and
18 patients in various wards were as	79.33%.	OBG.
follows 9/30, 14/30, 10/30, 26/30, and		In paediatrics it was 70% and in OBG antenatal
23/30 = 82/150. On these 11 patients are	Details of clinical material is	ward has 75% and gynec ward 70%
to be counted as 2 were admitted with	enclosed.	
headache, 1 with B2 deficiency, 2		
hypothyroidism, gastritis, 1 UTI, 11		
generalized weakness, 1 enteric fever and		-
1 colitis. None of the patient's case file has		
clinic investigative evidence o the disease		
or diagnosis and even the treatment		
prescribed did not match with the clinical		
diagnosis. This leaves only 71 patients		
worth considering.		
2.Paediatrics-during round of the assessor	Bed occupancy of patients on	
at 12.30 p.m. patients in various words	the day of assessment was	·
were as follows – 6/30 and 8/30=26/90.	94.44 %.	·
On these 26 patients a total of 14 were		C.

Date 8/2/19

Signature of Dean/Principal

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	admitted today in a second and		
	admitted today i.e. on 9.4.18.	Details of clinical material is enclosed.	
	3. TB & Respiratory Medicine-19 patients on 20 beds.	Bed occupancy of patients on the day of assessment was 95 %	
		Details of clinical material is enclosed.	
	4. Psychiatry-10 patients on 15 beds.	Bed occupancy of patients on the day of assessment was 93.33 %	
		Details of clinical material is enclosed.	
	5.Dermatology-15 patients on 15 beds, of which 7 patients are not to be considered as follows- Tenia crusis-1, Tenia Corporis-2, Scabies-3 and Urticaria-1. This leaves 8	Bed occupancy of patients on the day of assessment was 100 %	
	genuine patients for counting towards bed occupancy.	Details of clinical material is enclosed.	
	6. General Surgery- during round of the assessor at 12.30 p.m., patients in various wards were as follows-8/30, 9/30,	Bed occupancy of patients on the day of assessment was 70 %	
	15/30=32/90. Of these 15 patients in one	Details of clinical material is	
nature	of Assessors	Date 8/4/16	Signature of Dearborn Charles

Date 8/4/16

Medical College, Kachandur, Durg  $(C, \hat{C}_i)$ 

Medical College, Kachandur, Durg (C.C.)

	ward. As may as 12 had either pain in	enclosed.	
	upper limb, or in lower limb or back without supportive investigative evidence or relevant treatment. Thus only 20		
	genuine patients are to be counted for bed occupancy.		,
	7) Orthopaedics- During round of assessor at 12:30 PM, patients in various wards were as follows- 8/30, 9/30, 15/30 = 32/90 of these 15 patients in one ward, as many	Bed occupancy of patients on the day of assessment was 83.33 %	
	as 12 had either pain in upper limb, or back without supportive investigation evidence or relevant treatment. Thus only 20 genuine patients are to be counted for bed occupancy.	Details of clinical material is enclosed.	
	8.Ophthalmology-10 patients on 15 beds.	Bed occupancy of patients on the day of assessment was 80 %	
		Details of clinical material is enclosed.	
	9. ENT-14 patients on 15 beds of which 5 are CSOM.	Bed occupancy of patients on the day of assessment was 94 %	
		Details of clinical material is enclosed.	
Signature	of Assessors	Date 8 n 104	Signature of Bear Witchal

	10. OBG-The patients position is as- 30/30, 21/30 and 28/30=79.	Bed occupancy of patients on the day of assessment was 93.33%  Details of clinical material is enclosed.	
6	Patients  a. Except SR in Medicine and Residents and consultants of OBG & Gynae. Department, no other department ward resident knew anything about the admitted patient of their speciality suggesting that they are not working regularly in ward and have presented themselves just for head count/physical verification.	The admissions in various departments are under Unit system in Chandulal Chandrakar Memorial Medical College and Hospital, so it is quite possible that residents many not be aware of the details of patients admitted under other unites.	Almost all of the residents know about the patients.
	b. Medical Superintendent himself admitted that close to 60% of admissions in Medicine ward have diabetes and hypertension. On assessors round of the ward during review of these case files of these patients, facts regarding diagnosis and treatment mentioned in their case files of these patients, facts regarding diagnosis and treatment mentioned in	The observation 60 % of admission of patients in Medicine wards having Diabetes and Hypertension is not correct submitting the list of all patients admitted in Medicine ward on the day of assessment for your perusal.	Most of the patients are having minimal complaints.
nature	of Assessors	Date 8 h 19	Signature of Dean/Principal

Chandulal Chandrakar Memorial Medical College, Kachandur, Durg (C.G.) their case files of these patients, facts regarding diagnosis and treatment mentioned in their case files did notemerge meriting hospitalization of majority these cases. Thus the figures of bed occupancy above in the report are a little more liberal. Considering non requirement of hospitalization of these patients into account, the bedoccupancy will further go down.

c. In Medicine, patients after getting registered at central registration counter, did not get themselves registered in regular OPD registration registration register till 1 pm. Details of these patients were taken on rough page. This practice is not in line with standard of care and can be termed fraudulent as there is no plausible explanation for such a practice.

d. Except for Ophthalmology and OBG, there was not a single post-operative patient lying in surgical and allied surgical specialties wards who was operated 1-3 days earlier (5<sup>th</sup> to 7<sup>th</sup> April 2018), although

No sick patients are found in Medicine wards.

As per our Hospital organization system we avoid duplicacy of registration at both places since they are registered at central registration counter which saves lots of time and inconvenience to the patients since the registration is computerized these details can be accessed from any work station in the Hospital. So the remarks like FRAUDULENT are unnecessary.

These Post-operative case have been discharged on Sunday evening in patients request and Monday morning because most of the Surgical procedures

Signature of Assessors

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Chandulal Chandrakar Memorial

	OT register was full of entries of various operative procedures putting a question mark on the validity of these entries. In tough language, it can be termed as fraudulent.	required 1-2 days stay in the Hospital. There was also some day care surgery. On Monday there was Madai (Local Festival) in village.	OT Register showed only 2 cases in main operation theatre, One exploratory laparotomy and second case Nephrectomy.
	e. There were entries of more than 2 cases of caesarean section in last 24 hours in the OT register. But in the list of clinical material supplied by the institution, only 2 cesarean sections were mentioned. Variation of this data again puts question mark on the	List of Clinical Material provided by institution shows average no par day of normal deliveries and caesarean section. It is variable sometimes there are 9 – 10 Caesareans in one day and on other days it may be 2 -3 only. One the day of assessment 09-04-2018 there were 2 normal deliveries, 5 Caesareans section and 1 Still Birth.	There are only two Caesarean sections was there in the OT on the day of inspection.
7	There were only 8 Major Operation for the whole hospital on day of assessment as verified by assessors.	There were total 22 Major and 28 Minor Surgeries on the day of assessment. Number of Surgeries in this region in winter months is around 40 – 45 / day. As patients drainage of this Hospital is from rural and suburban area, whose main occupation is farming and April	There were only 11Major Operation for the whole hospital on day of assessment as verified by assessors

Signature of Dean Principal

Chandulal Chandrakar Memories

Medical College, Kachandur, Durg (C.C.)

8	Data of Clinical material, Radiological	<ul> <li>May Month is showing and harvesting time for Kharif Crop therefore patients are ready for Surgery whenever there is some emergency.</li> <li>All data provided was actual.</li> </ul>	Clinical material, Radiological investigations are
	investigations a provided by institute are inflated.		corresponding to the number of patients.
9	ICUS: Only 4 beds are available in NICU & 2 in PICU against requirement of 5 each. There was only 1 patient in NICU.	As per MCI Bed Requirement in NICU+ PICU= 5. There are total 6 Beds and 3 were occupied on the day of assessment.	NICU was 90% occupied.
10	Wards: In Demonstration rooms, there are no chairs; only plastic stools are available.	Stools are replaced with students writing chairs	In demonstration rooms flip chairs was present.
11	Central Library; 84 journals are available against requirement of 100. Supply of journals in 2017 is irregular. Many issues of several Journals are missing.	Order was already placed and subscription amount paid for 33 International Journals and 70 National Journals. List of available and ordered foreign Journals enclosed.	
		Some of the Journals were issued by the faculty and Senior Residents on the day of assessment.	
12	Community Medicine department: There is NIL Specimens available in the Museum.	Various specimens of Vaccines, Contraceptive, Drugs, Disinfectants, investigation kits,	A few specimens and few models are present

Date 8/ n/19

Signature of Dean/Principal

Chardrial Chandraker Memorial Medical College, Kachandur, Durg (C.G.)

13	Other deficiencies as pointed out in the assessment report.  1. As many as 55 faculties of all departments out of 132 and 43 Resident out of 80 has joined anytime between January 2018 to April 2018.	available in the museum of the Community Medicine Department.  All the faculties are appointed as par MCI requirements.  Presently around 35- 40 % faculty is working since 2013 – 14.  Recently due to opening of many new colleges (7 New Govt. Colleges in MP, New AIIMS) some of the senior faculty got selected in these colleges some Asst. Professor of Clinical Departments got selection in Super Specialty courses. So we had to appoint new faculty.	Of the 132 faculties, 92 were present and 71 residents were present out of 80.
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## 5. Clinical material:

Item	On Day of assessment	Remarks
O.P.D. attendance at 2.PM on first day	1209	
Casualty attendance (24 hrs. data)	39	
No of admissions	71	

Signature of Assessors

Signature of Dean/Principal
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Chandulal Chandraker Memorial Medical College, Kachandur, Durg (C.C.)

Item	1	Day of	Remark
No. of discharges		54	
Bed occupancy% at 10.00 AM on first day	60%		
Operative Work			
No, of major surgical operations	1 -	11	
No. of minor surgical operations		23	
No. of normal deliveries			
No. of caesarian sections	(	)2	
Radiological Investigations ( No. of patients )	O.P. D	I.P.D	
X-ray	121	81	
Ultrasonography	41	29	
Barium, IVP etc.	1	2	
C.T. Scan			

Item	26606	y of sment	Remarks
Laboratory Investigations - No. of Patients/samples	O.P. D	I.P.D	
Biochemistry	1209	1109	
Microbiology	211	229	

Date

Signature of Dean/Principal

Chandula! Chandrakar Memorksi Medical College, Kachandur, Durg (C.G.)

· Item	Day of assessment		Remarks
Laboratory Investigations - No. of Patients/samples	O.P. D	I.P.D	
Serology	54	36	
Hematology	1374	1021	
Clinical Pathology	118	37	
Histopathology	06	04	
Cytopathology	13	05	

Date 8/4/2019

Signature of Dear Principa

Chandulai Chandrakai Memoriai ledigal College, Kaghandur China (C.)

6. Medical College-Staff Strer	gth:
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Name of College:

Chandulal Chandrakar Memorial Medical College, Durg.

Number of students: 150

PG Courses (No):1.\_\_\_\_\_\_\_\_3.\_\_\_\_\_\_4. 5.

6. \_\_\_\_\_\_\_ 7. \_\_\_\_\_\_ 8. \_\_\_\_\_\_ 9. \_\_\_\_\_ 10.

11. \_\_\_\_\_12. \_\_\_\_13. \_\_\_\_\_15.

16. \_\_\_\_\_\_17. \_\_\_\_\_18. \_\_\_\_\_19. 20.

Signature of Assessors

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Date 8 2 7 1 9

Signature of Dean/Principal Signature of Dean/Principal

Medical College, Kachandur, Dwg (C.C.

Calculation Sheet	(Date:)
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Department	Designation	Requirement as per MSR (UG)	Additional faculty required for running PG courses (if any)	Total (UG + PG)	Accepted	Deficiency
	Professor	1		1	1	0
Anatomy	Assoc. Prof.	1		0	0	1
	Asstt.Prof.	2		2	2	0
	Tutor	3		3	3	0
	Professor	1		0	0	1
Physiology	Assoc. Prof.	1		1	1	0
	Asstt.Prof.	2		2	2	0
	Tutor	3		2	2	1
· · · · · · · · · · · · · · · · · · ·	Professor	1.				
Biochemistry	Assoc. Prof.	1	<u></u>	1	0	1
Diochemistry	Asstt.Prof.	2		1	2	0
	Tutor	4		2	1	1
	Professor	1			4	0
Pharmania	Assoc. Prof.	1		1	1	0
Pharmacology	Asstt.Prof.	2		1	1	0
	Tutor	3		2	0	2
	Professor			3	3	0
•	Assoc. Prof.	1 3		1	2	0
<b>Pathology</b>	Asstt.Prof.	3		3	2	0
	Tutor	5		3	3	0
	Professor			5	3	2
	Assoc. Prof.	1		1	1	0
Microbiology	Asstt.Prof.	1		1	0	1
	Tutor	2		2	2	0
		4		4	4	0
Forensic Medicine	Professor	1		1	1	0
<del></del>	Assoc. Prof.	1		1	1	0

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Signature of Deam P

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Department	Designation	Requirement as per MSR (UG)	Additional faculty required for running PG courses (if any)	Total (UG + PG)	Accepted	Deficiency
	Asstt.Prof.	1		1	1	0
	Tutor	3		3	1	2
	Professor	1		1	1	0
	Assoc. Prof.	2		2	1	1
	Asstt.Prof.	3		3	3	0.
Community	Epidemio-Logist-Cum-Asstt.Prof.	1		1	0	1
Medicine	Statistician-Cum-Tutor	1		1	<u> </u>	
	Tutor	4		4	2	0
				7		2
	Professor	1				<u> </u>
	Assoc. Prof.	4		1	1	0
General Medicine	Asstt.Prof.	5		5	2	2
	Sr. Resident	5		5	3	2
	Jr. Resident	10		10	11	0
	Professor	1		1	1	0
	Assoc. Prof.	2		2	3	0
<b>Paediatrics</b>	Asstt.Prof.	3		3	1	1
	Sr. Resident	3		3	2	1
	Jr. Resident	6		6	6	0
· · · · · · · · · · · · · · · · · · ·	Professor	1		<del></del>		<del> </del>
Tuberculosis &	Assoc. Prof.	0		0	0	1
Respiratory Diseases	Asstt.Prof.	1			1	0
	Sr. Resident	1		1	0	1
	Jr. Resident	1		1	1	1
Dermatology,	Professor	0				
Venereology &	Assoc. Prof.	1	· · · · · · · · · · · · · · · · · · ·	0	0	0
(Leprosy	Asstt.Prof.	1		1	1 -	1 0 ノ

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Date 8 / 4 / 19

Signature of Dearly

Changulal Chandrakar Memorial Medical College, Kachandur, Durg (C.G.)

Department	Designation	Requirement as per MSR (UG)	Additional faculty required for running PG courses (if any)	Total (UG + PG)	Accepted	Deficienc
	Sr. Resident	1		1	1	0
	Jr. Resident	1		1	1	1
	Professor	0		0	1	0
	Assoc. Prof.	1		1	1	0
	Asstt.Prof.	1	·	1	1	0
	Sr. Resident	1		1	1	0
Psychiatry	Jr. Resident	1		1	1	1
	Professor	1		1	1	0
7 7 6	Assoc. Prof.	4		4	3	1
General Surgery	Asstt.Prof.	5		5	2	3
	Sr. Resident	5		5	1	4
	Jr. Resident	10		10	9	1
	Professor	1		1	1	0
	Assoc. Prof.	2		2	2	0
Orthopaedics	Asstt.Prof.	3		3	2	1
	Sr. Resident	3		3	3	0
	Jr. Resident	6		6	6	0
	Professor	1		1	0	<del></del>
Oto-Rhino-	Assoc. Prof.	1		1	1	1
Laryngology	Asstt.Prof.	1		1	1	0
	Sr. Resident	1		1	1	
	Jr. Resident	1		1	1	0
phthalmology	Professor	1				
- Fururinionogy	Assoc. Prof.	1		1 1	1	0 0 0

Date 8 7 7 9

Signature of Dean/Prisopal

Chandulal Chandlakar Memorial Medical College, Kachandur, Durg (C.G.

Department	Designation	Requirement as per MSR (UG)	Additional faculty required for running PG courses (if any)	Total (UG + PG)	Accepted	Deficiency
	Asstt.Prof.	1		1	1	0
	Sr. Resident	1		1	1	0
	Jr. Resident	1		1	1	1
	Professor	1		1	0	1
	Assoc. Prof.	2		2	2	0
	Asstt.Prof.	3		3	3	0
Obstetrics &	Sr. Resident	3		3	3	
	Jr. Resident	6		6	6	
		·				
	Professor	1		1	0	1
	Assoc. Prof.	3		3	3	0
Anaesthesiology	Asstt.Prof.	5		5	4	1
Anaesthesiology  Radio-Diagnosis	Sr. Resident	3	<del></del>	3	0	3
	Jr. Resident	6		6	5	1
	Professor	1		1	0	1
Radio-Diagnosis	Assoc. Prof.	1		1	0	1
radio-Diagnosis	Asstt.Prof.	1		1	1	0
	Sr. Resident	3		3	3	0
	Professor	1		1	0	1
Dentistry	Assoc. Prof.	1		1	1	0
<u> </u>	Asstt.Prof.	1		1	0	1
	JR	1		1	1	0

Signature of Dean/Principal

Chandulal Candrakar Memorial

Liadical College, Kachandur, Durg (C.C.)

#### Notes:

For purpose of working out the deficiency:

(1) The deficiency of teaching faculty and Resident Doctors shall be counted separately.

#### (A) For Teaching Faculty:

- (a) For calculating the deficiency of faculty, Prof., Assoc Prof., Asst. Prof & Tutor in respective departments shall be counted together.
- (b) Any excess teaching faculty in higher cadre can compensate the deficiency of lower cadre of the same department only.
- (c) Any excess teaching faculty of lower cadre/ category in any department cannot compensate the deficiency of any teaching faculty in the higher cadre/category of the same department or any other department. e.g. excess of Assistant Professor cannot compensate the deficiency of Associate Professor or Professor.
- (d) Excess/Extra teaching faculty of any department cannot compensate the deficiency of any teaching faculty in any other department.

#### (B) For Resident Doctors:

- (a) Excess of SR can be compensated to the deficiency of JR of the same department only.
- (b) Excess SR/JR of any department cannot compensate the deficiency of SR/JR in any other department.
- (c) Any excess of JR cannot compensate the deficiency of SR in same or any other department.
- (d) Any excess/ extra teaching faculty of same or any other department cannot compensate the deficiency of SR/JR. e.g. excess of Assistant Professor cannot compensate the deficiency of SR or JR.
- (2) A separate department of Dentistry/Dental faculty is not required where a dental college is available in same campus/city and run by the same management.

Signature of Assessors

Date

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Signature of Dean/Principal

Medical Codege, Kachandur, Durg (C.C.)

(3) Colleges running PG program require additional staff, beds & other requirements as per the PG Regulations - 2000.

## 7. Details of Faculty/Residents not counted/accepted.

(Only faculty/residents who signed attendance sheet before 11:00 am on the first day of assessment should be verified. (In case of Junior Residents/Senior Residents on night duty, 12:00 noon.) No verification of Declaration forms should be done for the faculty/residents coming after 11:00 am of the first day of assessment)

Sr. No	Name	Designation	Department	Remarks/Reasons for Not Considering
1.			·	

8.	1) Deficiency of Teaching Faculty:	3o	_%
	2) Deficiency of Resident doctors:	12	0/

9. Any other deficiency/remarks

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Signature of Assessors

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