

MEDICAL COUNCIL OF INDIA

ASSESSMENT FORM FOR 150 ADMISSIONS REPORT

(INCREASE IN ADMISSION CAPACITY FROM: Not Applicable TO: Not Applicable)

Part A -I (**2019-20**)

(To be filled by the Institution)

1.1 Type of Assessment

U/S 10A- Regular/Compliance: Letter of Permission (), 1st renewal (√), 2nd renewal (), 3rd renewal (), 4th renewal ()

U/S 10A- Increase Admission Capacity: Regular/Compliance: Letter of Permission (), 1st renewal (), 2nd renewal (), 3rd renewal (), 4th renewal (): **Not Applicable**

U/S 11: Recognition: Regular / Compliance: **Not Applicable**

U/S 19 Continuation of Recognition: Regular / Compliance: **Not Applicable**


Any Other: **Not Applicable**

Note:

1. All rows/columns must be filled.
2. 'Not applicable' should be clearly written wherever required information is not relevant.
3. All pages of the A-I are to be signed by Dean/Principal/Director.

06/02/2018

Date: 07/12/2018


 Signature with stamp
Dean/Principal/Director
Banas Medical College
& Research Institute
Palanpur-385001

Name of the Institution/ College : Banas Medical College & Research Institute, Palanpur

Address of College : General Hospital Campus, Shimla Gate, Palanpur Pin-385001,
: Banaskantha, State: Gujarat.
: New Campus Site- At & Po: Moriya, Ta: Palanpur Dist: Banaskantha
: State: Gujarat.

Address of Hospital : General Hospital Campus, Shimla Gate, Palanpur Pin-385001,
Banaskantha, State: Gujarat

Telephone No. : Dean Office- 02742-265780
General Hospital Campus, Shimla Gate, Palanpur Pin-385001,
Banaskantha, State: Gujarat

E-mail : banasmcri@gmail.com,

Fax : Dean Office 02742-252723, GHP c/o CDMO Palanpur: 02742-251709

Website : www.bmcri.co.in

Management : Government /Society/Trust/Company: Trust (in public-private partnership
: with Govt. of Gujarat.

Regn. No. of Society/Trust/Company : E/1530/ Banaskantha

Consent/Affiliation from University : Hemchandracharya North Gujarat University, Patan-384265 Gujarat.

Period of Validity : 1-Year (Till-14/06/2019)


No. of seats as per Essentiality Certificate: 150 (Annexure I)

Period of Validity :

Assessment date :

Last Assessment Date : 23/04/2018

Date: 06th & 07th Dec. 2018


Signature with stamp: Dean /Principal/ Director
Banas Medical College
& Research Institute
Palanpur-385001

1.2

(a) Location: The applicant college is located in Moriya (city/ village) of Palanpur taluka Banakantha district of Gujarat state.

(b) The College has following plots of land: **(Annexure II)**

| Plot # | Survey # | Place | Area | Remarks if any |
|--------|----------|---|----------------------|----------------|
| 1 | 195 | Moriya Village, Ta. Palanpur. | 89031 Sq Meters | |
| 2 | 11382 | General Hospital Palanpur, Ta. Palanpur. | 27153.3217 Sq Meters | |
| | | | | |

(c) The campus is unitary/divided into **Two** parts. If not unitary distance between parts. **9.0 KM.**


1.3 **Building Plan approval from the competent authority: Town Planning & Valuation Department, Palanpur, Govt of Gujarat**
date of approval: **Vide letter No-NABP/Moriya/Palanpur/1687/Dated: 10/10/2017.**

1.4 **Buildings:**

College: Proposed (Moriya Village): Ground coverage: 6242.92 & Built-up:46196.76 Sq.mt. Existing: in General Hospital Palanpur- Ground coverage: 1,046 Sq.mt. & Built-up: 4,184 Sq.mt.

Hospital (including OPD): Proposed (Moriya Village): Ground coverage: 7141.55 & Built-up:79082.47 Sq.mt. Existing: in General Hospital Palanpur- Built-up: 10691 Sq.mt.sq.mt.

Date: 06th & 07th Dec-18


Signature with stamp
Dean/Principal/Director
Banar Medical College
& Research Institute
Palanpur-385001

Hostel & Residential complex: Proposed (Moriya Village): Ground coverage: 7,927.24 Sq.mt. & Built-up:76,998.52 Sq.mt.
Existing: in General Hospital Palanpur: 3,943 Sq.mt.

- 1.5 **Building Use/ Occupancy Certificate:** approved by . Not Applicable
- 1.6 **Nearest Commercial airport:** Ahmedabad Distance in kms: 154 **Traveling time required:** 3 Hrs
- 1.7 **Nearest major Railway Station:** Palanpur Distance in kms: 8.6 **Traveling time required:** 15 Minutes
- 1.7 (a) **Nearest major city is** Palanpur, distance in kms: 8.6 , **Traveling time required:** 10 Minutes
- 1.8 **Water Supply:** Through Municipal / Bore wells: **Municipal**
- 1.9 **Electric supply:** Sanctioned Load: **25000 KVA.**
- 1.10 **Generators:** available/not available, Available load: 250 KVA
- 1.11 **Drainage & sewage disposal:** Yes
- 1.12 **Working Hours:**

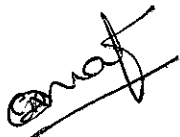
1. OPD Timings: 9:00 AM to 1:00 PM & 4:00 PM to 6:00 PM (Monday to Friday)

9:00 AM to 1:00 PM (Saturday)

2. College Timings: 9:00 AM to 5:00 PM

3. Library Timings: 9:00 AM to 9:00 PM

Date: 06th & 07th Dec-18


Signature with stamp
Dean/Principal/Director
Banas Medical College
& Research Institute
Palanpur-385001

1.12 (A) Details of PG courses run by the college / Institution : NO

| S. No. | Department / Speciality | Diploma / MD / MS/ M.Ch/ DM | Number of Seats | Status of Recognition | | Number of Seats filled in last Academic year |
|--------|-------------------------|-----------------------------|-----------------|-----------------------|------------|--|
| | | | | Permitted | Recognized | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

1.12 (B) Details of other academic colleges available in the campus : [Yes/No] : NO

- (a) Dental College : _____
- (b) Nursing College : _____
- (c) Physiotherapy College : _____
- (d) Pharmacy College : _____
- (e) Ayush College : _____
- (f) Engineering College : _____
- (g) Any other : _____

1.12 (C) Details of any other medical college being run by same management / Trust / Society / Company, anywhere(not applicable for Govt. colleges): NO _____

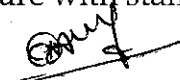
Date: 06th 07th Dec-18


 Signature with stamp Dean/Principal/Director
 Banas Medical College
 & Research Institute
 Palanpur-385001

1.13 Annual Budget: College & Hospital (Annexure III)

| Year | Current Financial Year | | Previous financial year As per Audited report | |
|------------------------|------------------------|-----------------------|--|--------------------------|
| | College | Hospital | College | Hospital |
| Salary | | | | |
| - Doctors | 9,00,00,000 | 12,69,03,845 | 4,85,76,167 | 12,69,03,845 |
| - Resident Doctors | | (Including all staff) | 19,91,800 | (Including all staff) |
| - Other Staff | 3,00,00,000 | | 2,46,60,000 | |
| Technical Training | | | - | - |
| Library & Education | | | 33,14,000 | |
| Maintenance | | | - | - |
| Contingencies | 1,30,50,00,000 | | - | - |
| Others | | 49,54,021 | 15,00,000 | 49,54,021 |
| Total | 1,42,50,00,000 | 13,18,57,866 | 8,00,41,967 | 13,18,57,866 |

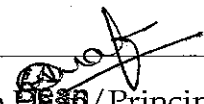
Date: 06th & 07th Dec-18

Signature with stamp Dean/Principal/Director

 Banas Medical College
 & Research Institute
 Paianpur-385001

1.14 Paramedical staff (Nos.): Give details of technicians department wise:

| Department | Technician | Assistant | Attendant | Other |
|------------------|------------|-----------|-----------|-------|
| Radiology | 3 | 1 | 1 | 3 |
| General medicine | 2 | 0 | 1 | 2 |
| Pediatrics | 1 | 1 | 1 | 1 |
| OT | - | 1 | 1 | 2 |
| Anesthesia | 1 | 0 | 2 | 2 |
| Blood Bank | 2 | 0 | 1 | 1 |
| Labour Room | - | - | 2 | 2 |
| Emergency Room | 1 | - | 1 | 1 |
| CSSD | - | 1 | - | 1 |
| Mortuary | - | 1 | - | 1 |
| Laundry | - | - | 1 | - |
| Electrical | 1 | - | - | - |
| Housekeeping | | | | 06 |
| Psychiatry | 1 | 0 | 1 | 1 |

Date: 06th P 07th DEC-18

Signature with stamp  Dean/Principal/Director
 Banas Medical College
 & Research Institute
 Palanpur-385001

| | | | | |
|-----------------------|---|---|---|---|
| Biomedical Waste Man. | | | | |
| Pharmacy | - | 1 | 2 | 5 |
| ENT | 1 | 0 | 1 | 2 |
| Orthopedics | 0 | 1 | 1 | 2 |
| Ophthalmology | 1 | 1 | 1 | 2 |
| TB & chest | 1 | 0 | 1 | 1 |

1.15 Nursing Staff available:

| | | | | |
|--------------------|---|---|---|---|
| General surgery | 1 | 1 | 1 | 2 |
| Anatomy | 1 | 1 | 1 | 4 |
| Biochemistry | 1 | 0 | 1 | 2 |
| Physiology | 1 | 1 | 1 | 3 |
| Microbiology | 2 | 1 | 1 | 4 |
| Pathology | 1 | 1 | 1 | 4 |
| Forensic Medicine | 1 | 1 | 1 | 2 |
| Community Medicine | 1 | - | - | 3 |
| Pharmacology | 1 | - | 1 | 1 |
| UHC | 1 | 0 | 1 | 3 |
| RHC | 1 | 0 | 1 | 3 |

Date: 06th 10th Dec-18

Signature with Stamp
Dean/Principal/Director
Banas Medical College
& Research Institute
Palanpur-385001

| No of Beds: 300 | | |
|-----------------|---------------|----------------|
| Category | Required Nos. | Available Nos. |
| Staff Nurses | 141 | 141 |
| Sister Incharge | 27 | 27 |
| ANS | 4 | 4 |
| DNS | 2 | 2 |
| Nursing Suptd | 1 | 1 |
| Total | 175 | 175 |

1.16 Medical Education Unit (MEU): (Annexure IV)

Available as per Regulations : Yes/No
 Name of the MEU coordinator : Dr.Sunil Oza (Professor, Anatomy)
 Details of affiliated faculty : **Officer In Charge**
 Dr.Chhya Anil Saraf (Chairman)
Members
 Dr.M.V.Mehta
 Dr.Radhika Khara
 Dr.Mayankkumar Javia
 Dr. Nishant Bhimani
 Dr.Pushti Vachhani
 Dr.Himanshu Patel
 Dr.Maulin Mehta
 Dr.Purvi Tanna

Details of the Orientation programme and Basic Course Workshop undergone by MEU Coordinator:

- **Dr.Sunil Oza (Professor, Anatomy)**
- **Basic course workshop:** 21th to 23th April 2011 at Regional training center, C.U.Shah Medical college, Surendranagar
- **Revised basic course workshop:** 10th to 12th May 2016 at Regional training center, Pramukhswami medical college, Karamsad

Date: 06th to 07th Dec-15

Signature with stamp Dean/Principal/Director

Dean
Banas Medical College
& Research Institute
Palanpur-385001

- **ATCOM Workshop:** 9th May 2016 at Regional training center, Pramukhswami medical college, Karamsad

- Name of the MCI Regional Centre where Above training has been undertaken
 - o Regional training center, Pramukhswami medical college, Karamsad
- Date/s of the above workshops
 - o **Revised basic course workshop:** 10th to 12th May 2016
 - o **ATCOM Workshop:** 9th May 2016

Details & Duration of Workshops in Medical Education Technology conducted by MEU: --

Details of faculty who have undergone basic course workshop in *Medical Education Technology* at the allocated MCI Regional Centre: --(Annexure IV)

Feedback evaluation of workshops and action taken reports on the basis of feedback obtained

1.17 Continuing Medical Education: (Annexure-IV-A)

Details of CMEs/workshop organized by the college held in the past 1 year: --- 1 (One)


Details of the credit hours awarded for the past one year: --- **Allocation of credit hours pending with Gujarat Medical Council**

1.18 College Council: (Annexure V)

- Name, designation, contact no. and address of the President & Secretary.
President: Dr Chhaya Saraf, Dean, BMCRI
Secretary: Dr Premaram Choudhary, Associate Professor, Department of Physiology
- Composition of the Council (HODs as members & Principal / Dean as chairperson)
- No. of times the College Council meets per year (min 4) : 5 TIMES
- Action taken report on College Council Meetings

1.19 PG Course: If the college is running PG course; Please mention the intake of PG seats subject wise: **Not Applicable**

Date: 06th & 07th Dec-18


Signature with stamp Dean/Principal/Director

**Banas Medical College
 & Research Institute
 Palanpur-385001**

| Sr No. | Degree/Diploma | Subject | No. of Permitted sets | No. of recognized seats |
|--------|----------------|---------|-----------------------|-------------------------|
| | | | | |
| | | | | |
| | | | | |

1.20 Clinical Material:

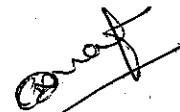
| Item | Daily average (of last 12 months) as provided by institute |
|---|--|
| O.P.D. attendance (At the end of OPD timing) | 688 |
| Casualty attendance (24 hrs. data) | 109 |
| No of admissions | 60 |
| No. of discharges | 23 |
| Bed occupancy: No of Beds occupied | 206 |
| No of beds required | 300 |
| Bed occupancy % | 69 % |
| Operative Work | |
| No, of major surgical operations | 5 |

Date: 06th & 07th Dec-18


 Signature with stamp Dean/Principal/Director
 Banas Medical College
 & Research Institute
 Palanpur-385001


| Item | Daily average (of last 12 months) as provided by institute | |
|--|--|--------------|
| | | |
| No. of minor surgical operations | 6 | |
| No. of normal deliveries | 02 | |
| No. of caesarian sections | 01 | |
| <u>Radiological Investigations - No of patients.</u> | O.P.D | I.P.D |
| X-ray | 38 | 40 |
| Ultrasonography | 05 | 06 |
| Barium, IVP etc. | - | - |
| C.T. Scan | 04 | 05 |
| <u>Laboratory Investigations - No of patients/samples</u> | O.P.D | I.P.D |
| Biochemistry | 59 | 197 |
| Microbiology | 23 | 21 |

Date: 06th & 07th Dec-18

Signature with stamp  / Principal / Director
**Banas Medical College
 & Research Institute
 Palanpur-385001**

| Item | Daily average (of last 12 months) as provided by institute | |
|--|--|-----|
| | Serology | 172 |
| Haematology | 179 | 202 |
| Clinical pathology | 61 | 144 |
| Histopathology | - | - |
| <u>Cytopathology</u> | 2 | 0 |
| <u>Others</u> | | - |
| Any other (HIV/AIDS, DOTs, Malaria etc) | | 25 |

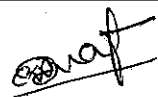
Date: 08th & 09th Dec-18


 Signature with stamp
 Dean
 Banas Medical College
 & Research Institute
 Palanpur-385001

1.21 College Website:

| Sr. No. | Details of information | Yes/No |
|---------|---|----------------|
| 1. | Details of Dean / Principal and Medical Superintendent Including their name, qualification complete address with telephone and STD code, fax and E-mail etc. | Yes |
| 2. | Teaching staff, Resident doctors ,non-teaching staff , Technical staff , Nursing staff--- (a)department & designation wise with joining date (b) Unit wise faculty & resident list | Yes |
| 3. | Details of the affiliated university and its Vice-Chancellor and Registrars. | Yes |
| 4. | Citizen Charter | Yes |
| 5. | List of students admitted merit-wise category-wise (UG & PG) for the current and previous year. | Yes |
| 6. | Result of all the examinations of last one year. | Not Applicable |
| 7. | Details of members of the Anti Ragging Committee with contact details including landline Phone, mobile, email etc... | Yes |
| 8. | Details of members of the Gender Harassment Committee with contact details including landline Ph. mobile, email etc... | Yes |
| 9. | Toll free number to report ragging. | Yes |
| 10. | Details of the sanctioned intake capacity of various courses UG as well as PGs by the MCI. (with the scan copies of permission letter) | Yes |
| 11. | Any research publication during the last one year. | Yes |
| 12. | Details of any CME programmes, conferences and/or any academic activities conducted by the institution. | Yes |
| 13. | Details of any awards and achievements received by the students or faculty. | Yes |
| 14. | Detailed status of recognition of all the courses(with the scan copies of permission letter) | Not Applicable |
| 15. | Details of clinical material in the hospital | Yes |
| 16. | unit /dept .wise beds distribution | Yes |

Date: 06th & 07th Dec-18


 Signature with Stamp Dean/Principal/Director
Banas Medical College
 & Research Institute
 Palanpur-385001

Undertaking - To be given by the Dean/Principal of the Institute

I hereby give an undertaking that:

- (i) The college will admit students only after obtaining the permission from Central Govt.
- (ii) In the event of this declaration turning out to be either incorrect or any part of this declaration subsequently turning out to be incorrect or false, it is understood and accepted that the undersigned shall be responsible for any such misdeclaration or misstatement.
- (iii) In case, the declaration made by me is found to be false in any material point then necessary Civil / Criminal proceedings, including prosecution under Section 199 of the Indian Penal Code, 1860, may be initiated against me by the Competent Authority.
- (iv) The college has obtained all requisite statutory approvals.
- (v) The college has fulfilled all requirements as per the applicable Minimum Standard Requirement for the Medical College Regulations, 1999.
- (vi) The mandatory requirements laid down by the Persons with Disabilities Act are met by the college

Date: 06th & 07th Dec-18


Signature with Stamp Dean/Principal/Director
**Banas Medical College
& Research Institute
Palanpur-385001**

MEDICAL COUNCIL OF INDIA**ASSESSMENT FORM FOR 150 - MBBS ADMISSIONS REPORT**(INCREASE IN ADMISSION CAPACITY FROM: Not Applicable TO: Not Applicable)**Part A-II (2019-20)**

(to be filled by the Assessors)

24/12/18
18/12/18

1.1 Type of AssessmentU/S 10A-regular/compliance: Letter of Permission (), 1st renewal (✓), 2nd renewal (), 3rd renewal (), 4th renewal ()U/S 10A- Increase Admission Capacity: Regular/Compliance: Letter of Permission (), 1st renewal (), 2nd renewal (), 3rd renewal (), 4th renewal ()U/S 11- Recognition - Regular/Compliance: Not ApplicableContinuation of Recognition - Regular / Compliance: Not ApplicableAny Other: Not Applicable

| | | |
|-------------------------|---|---|
| Name of the Institution | : | Banas Medical College & Research Institute, Palanpur |
| Address | : | General Hospital Campus, Shimla Gate, Palanpur Pin-385001, Banaskantha, State: Gujarat. New Campus Site- At & Po: Moriya, Ta: Palanpur Dist: Banaskantha, Gujarat. |
| Telephone No. | : | Dean Office- 02742-265780 Dean Office at GHP c/o CDMO Palanpur: 02742-253083 Fax No: Dean Office 02742-252723, GHP c/o CDMO Palanpur: 02742-251709 |
| E-mail | : | banasmcri@gmail.com |

Signatures of the Assessors

Dr. PUSKPA SARKAR
7/12/18

Date

M.S.
Dr. MEGHACHANDRA SINGH
7/12/18

Signatures of Dean/Principal

Dr. Anand
07/12/18

Dr. Anand
7.12.18

| | | | | |
|---------------------------|--|---|------------|--|
| College Website : | : | www.bmcri.co.in | | |
| Council Letter No. & Date | : | No. MCI-34(41)(UG) (R-3)/ 2019-20-Med./ | | |
| Assessment Date: | 06 th & 7 th December,2018 | Last Assessment Date : | 23/04/2018 | |
| PG Courses | : | Yes/No | | |


Particulars of Assessors


| Name of the Assessors | Correspondence Address | Contact No. | Email |
|-------------------------------------|--|--------------------------------|--|
| Dr. Arun Kumar De (Co-ordinator) | Professor & HOD, Deptt. of Paediatrics, Midnapore Medical College, Midnapor, West Bengal. | Mob. - 09339772266 | arunkrde@rediffmail.com |
| Dr. Pushpa Sarkar | Professor, Deptt. of Biochemistry Mandya Institute of Medical Science, Mandya, Karnataka | Mob: - 09342189677 | pushpasarkar@hotmail.com |
| Dr. M. Meghachandra Singh | Professor Deptt. Of Community Medicine Maulana Azad Medical College, New Delhi. | Mob.- 9968604248,9818354458 | megharita@yahoo.com megharita1@gmail.com |

1.2. The College has following (Annexure-I)

| | |
|---------------------|--|
| The campus plot is. | Unitary/divided into: Two parts if divided, Please give details. Distance between parts. 9.0 KM Plot Survey Place Area 1. 195 Moriya Village, Ta. Palanpur 89031 Sq mtr |
|---------------------|--|

Signatures of the Assessors


(PUSHPA SARKAR)


(DR. M. MEGHACHANDRA SINGH)

Date 7-12-18

Signatures of Dean/Principal


07/12/18

| | |
|---|---|
| | 2. 11382 General Hospital, Palanpur 27153.3217 Sq mtr |
| Building Plan approval from the competent authority. | Name: Town Planning & Valuation Department, Palanpur, Govt of Gujarat : letter No-NABP/Moriya/Palanpur/1687/ Date:10/10/2017 |
| Building Use/ Occupancy Certificate from the competent authority. | No. NABP/Moriya/Palanpur/1687 dated: 10/10/2017 |

- 1.3 Dean /Principal: **Dr. Chhaya Anil Saraf**, M.D.(Physiology) with Twenty five years and six months of teaching experience - **6.4 yrs** of professor & **4 yrs** of experience of Asso Prof, **5 yrs** of Assistant professor, **10.2 yrs** of Tutor. She is also holding the post of Professor in the Department of **Physiology**.

Dean Office is located in **General Hospital Campus** of the college/building along with the administrative block. Adequate space (as per MSR guidelines by MCI) and other required facilities (as given in the table below) are provided/ not provided to the administrative staff.

| Office Space Requirement | Requirement Space (mts) | |
|--------------------------|-------------------------|-----------|
| Dean/Principal Office | 36 | Available |
| Staff Room | 54 | Available |
| College Council Room | 80 | Available |

- 1.4 Medical Education Unit (MEU): Annexure-II

| | |
|------------------------------|-------------------------------------|
| Available as per Regulations | : Yes/No- |
| Name of the MEU coordinator | : Dr.Sunil Oza (Professor, Anatomy) |

Signatures of the Assessors



Pushpa Saran
(PUSHPA SARAN)

Date 7-12-18

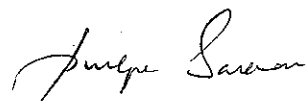
Dr. Sunil Oza
(Dr. Sunil Oza (Professor, Anatomy))

Signatures of Dean/Principal

Dr. Chhaya Anil Saraf
10/10/18

| | |
|--|---|
| Name, Designation & Experience of affiliated faculty | : Annexure-II |
| Name of the MCI Regional (Nodal) Centre where above training has been undertaken | : Regional training center, Pramukhswami Medical College, Karamsad, Gujarat |
| Details of the Orientation programme and Basic Course Workshop undergone by MEU(No. of programmes organized during Academic year, No. of People attended, proceedings (to be verified at the time of assessment) | : NOT AVAILABLE |
| Date/s of the above workshops | : --- |
| Details & Duration of Workshops in Medical Education Technology conducted by MEU | : --- |
| Details of faculty who have undergone basic course workshop in <i>Medical Education Technology</i> at the allocated MCI Regional Centre | : Annexure-II |
| Details of faculty who have undergone advanced course workshop in <i>Medical Education Technology</i> at the allocated MCI Regional Centre | : Dr.Chhaya Saraf, Nodal Center SRMC ,Chennai |
| Feedback evaluation of workshops and action taken reports on the basis of feedback obtained | : |


Signatures of the Assessors


(PUSHPA SARKAR)

Date 7-12-18


(Dr. M. MEGHA CHANDRA SINGH)

Signatures of Dean/Principal


07/12/18


1.5 Continuing Medical Education: (Annexure-III-A)

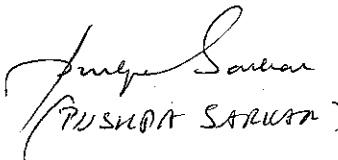
| | | |
|--|---|---------------|
| No and Details of CMEs/workshop organized by the college held in the past 1 year | : | 01 |
| Details of the credit hours awarded for the past one year | : | NOT AVAILABLE |


1.6 College Council: (Annexure-III-B)

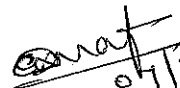
| | | |
|---|---|--|
| Name, designation, contact no. and address of the President & Secretary. | : | President: Dr Chhaya Saraf, Dean, Banas Medical College & Research Institute, Palanpur, Mobile No:9890882565 Members Secretary: Dr. Prema Ram Choudhary, Associate Professor, Department of Physiology, Mobile No: 9558258818 |
| Composition of the Council (HODs as members & Principal / Dean as chairperson) | : | Chairperson: Dean, Dr. Chhaya Saraf. Members- All Head of Departments. Two Student Representative |
| No. of times the College Council meets per year (min 4) | : | 5 (FIVE) |
| Details of college Council meetings where students Welfare was discussed and Action taken report (details / comments in annexure III) | : | <u>Annexure-III-B</u> |

1.7 Pharmacovigilance Committee: Present/Absent- (Annexure-IV)
No. of meeting in the previous yrs. Two (02) (Minutes to be checked)


Signatures of the Assessors


(PUSHPA SARAF)


(Dr. MEGHACHANDRA SINGH)
Date 7-12-18


07/12/18
Signatures of Dean/Principal

1.8 Examination Hall:

| Requirement | Available |
|---|---------------|
| No. - 1/2/3 Area - 250 Sq. mt. Capacity - 250 | NOT Available |

1.9 Lecture Theatres:

| | Medical college | | Hospital | | Comments |
|----------------|-----------------|-----------|----------|-----------|--|
| | Req | Available | Req | Available | |
| Number | 2 | 2 | -NA- | -NA- | |
| Capacity | 180 | 150 | -NA- | -NA- | |
| Type (Gallery) | Yes / No: | | Yes / No | | |
| A.V. Aids | Yes / No: | | Yes / No | | One hall has AV aids. The other hall does not have AV aids |

1.10 Library

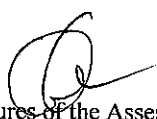

Air-conditioned - Yes/No

Working Hours: 9:00am to 7:00 pm inside reading & upto 11 pm outside reading


- Stack room : 01
- Reading room : 03 - Two for UG Students and One for staff

| | Required | Available | Remarks |
|------|------------|-----------|---------|
| Area | 1200 Sq.m. | 600 Sq.m. | |

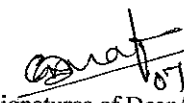
Signatures of the Assessors



 (RUSNA SARKAR)

Date


 (B.M. MEGHACHANDRA SINGH)
 7-12-18

Signatures of Dean/Principal


 07/12/18

| | | | |
|-----------------------------------|----------------------|-----------------------|----------------|
| Student Reading Room (Inside) | 75 : Capacity | 20 : Capacity | |
| Student Reading Room (Outside) | 75 Capacity | 20: Capacity | |
| Staff Reading Room | 30 Persons | 20 Persons | |
| Room for Resident/PG reading room | | | |
| Particulars | Required Nos. | Available Nos. | Remarks |
| No. of Books | 3000 | 2611 | |
| Journals (Indian) | 14 | 14 | |
| Journals (Foreign) | 06 | 06 | |
| Internet Nodes | 40 | 12 | |

1.11 Common Room for Boys & Girls

| | | | |
|--------------------|------------------------------|-------------------------------|------------------------------|
| Common Room | Area Required Sq. Mt. | Available Area Sq. Mt. | Toilet - Attached Y/N |
| Boys | 150 Sq. Mt | 150 Sq. Mt | No attached toilet |
| Girls | 150 Sq. Mt | 150Sq. Mt | Yes |

1.12 Central Photography Section: Available Yes/No: YES
 Staff Yes/No : YES, one photographer
 Equipments Yes/No : YES (List attached : ANNEXURE IV A)

Signatures of the Assessors

PUSULA SANKAR
 PUSULA SANKAR

Date 7-12-18

M. Meghachandra Singh
 (M. MEGHACHANDRA SINGH)

Signatures of Dean/Principal

M. Meghachandra Singh
 07/12/18

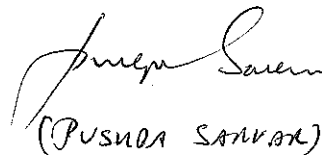
1.13 Hostel: Location - Within campus

| Hostel Category | Required Capacity | Available Capacity (No Rooms X capacity of each room = Total capacity) | Furnished (Y/N) | Toilet Facility Adequate/ Inadequate | Mess (Y/N) | Hygiene of Hostel campus Y/N | Visitor room, AC Study room with internet & Computer, Recreation room with TV, Music, Indoor Games Y/N | Remarks |
|---------------------------------------|-------------------|---|-----------------|--------------------------------------|------------|------------------------------|--|--|
| UG Students @ (60% Capacity) | 180 | Boys:15×3=45 | Yes | Not Adequate | Yes | NO | NO | Same building and same floor are being shared by the residents and staff nurses for staying. A single mess is being shared by the students, residents and staff nurses. |
| | | Girls:25×3=75 | Yes | Not Adequate | Yes | NO | NO | |
| Interns @ 100% Capacity | 150 | NA | NA | NA | NA | NA | NA | |
| Resident @ 100% Capacity including PG | 47 | 15×3=45 | No | Not Adequate | NO, | NO | NO | |
| Nurses @ 20% Capacity | 35 | 9×3=27 | Yes | Not Adequate | Yes | NO | NO | |

Residential Quarters:

| Category | Required Nos. | Available Nos. | Remarks |
|-----------------------------------|---------------|----------------|--|
| Teaching Staff @ 20% Capacity | 20 | 14 | Few quarters are vacant. One is occupied by non teaching staff |
| Non-Teaching Staff @ 20% Capacity | 32 | 06 | |

Signatures of the Assessors



 (PUSHA SANKAR)

Date

7-12-18


 (M. MEGHACHANDRA SINGH)

Signatures of Dean/Principal


 07/12/18

1:14 Recreational Facilities:

| | |
|-------------------------|--|
| Outdoor games | Yes/No: NO |
| Play field/s | NO |
| Type of games | NO |
| Indoor games facilities | Yes/No: NO |
| Gymnasium | Available /Not available : NOT AVAILABLE |

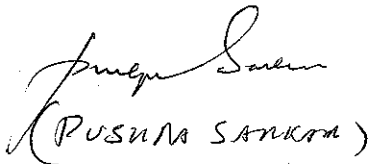
1.15 Gender Harassment Committee -: Yes/No-(Documents to be seen at the time of assessment): (Annexure-V)

1.16 Anti Ragging Committee: Yes/No (Documents to be attached as annexure): (Annexure-VI)


1.17 Biometric Devices: Not installed yet.

- No of OFAMOS devices installed in the college.
- Whether all OFAMOS devices are working conditions?
- If not the reason thereof, and whether complaints lodge to SI
- Number of faculty punches recorded up to 11:00 a.m. on the day of assessment.
- Any other relevant information.

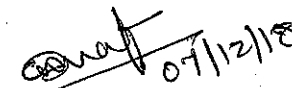
Signatures of the Assessors


(PUSHA SANKAR)

Date 7-12-18


(A-M. MEGHACHANDRA SINGH)

Signatures of Dean/Principal


07/12/18

TEACHING HOSPITAL

- 2.1 Name of the Hospital: **General Hospital Palanpur, Ta.- Palanpur (B.K.)**
 Owned by: Government/Trust/Society/Company: **Trust (in public – private partnership with Govt. of Gujarat)**
- 2.2 Name of the Medical Superintendent:
(1) Dr. M.V.Mehta, MD/MS (MS- General Surgery), with 24 years administrative experience.


| | Space Requirement | Availability |
|------------------------|-------------------|--------------|
| Medical Supdt's Office | 36 sq. mt. | Available |
| Administrative Office | 150 sq. mt | Available |

2.3 **Teaching and other facilities :**


| | | |
|--|---|--|
| OPD Timings | : | Morning: 9:00A.M. to 1:00 P.M.(Monday to Friday) 9:00AM to 1:00 PM(Saturday) Evening: 4:00 PM to 6:00PM (Monday to Friday) Casualty/ Trauma centre: Round the clock |
| Separate Registration areas for male/female patients available | : | yes/no : yes |
| Separate Registration counters for OPD/IPD | : | Single registration centre available both for IPD & OPD patients |
| Are the Registration counters computerized | : | yes |
| Staff for registration center | : | adequate / inadequate (on the basis of OPD attendance): adequate |

Signatures of the Assessors





(PUSHPA SARKAR)

Date


(A-M-MEHA CHANDRA SINGH)
7-12-18

Signatures of Dean/Principal



07/12/18

| | | |
|--|---|-----------------------|
| Waiting areas for above patients available | : | yes/no: yes |
| No. of rooms for examination of patients available | : | yes/no: not adequate |
| Capacity of teaching area in each department | : | yes/no: not adequate |
| Enquiry Desk | : | yes/no: not available |

2.4 Facilities available in OPD

| | | | |
|--|---|----------------------|-----------------------------|
| -Medicine Injection room - Male - Female | Yes/No Yes/No | E.C.G. Room | Yes/No |
| Surgery Dressing room - - Male - Female | Yes/No Yes/No | Minor OT | Yes/No |
| Orthopaedics Plaster room Dressing room - - Male - Female | Yes/No Yes/No Yes/No | Plaster cutting room | Yes/No |
| Ophthalmology | Refraction Rooms Dark Rooms Dressing Rooms / Minor Procedure Room | | Yes /No Yes/No Yes/No |
| ENT | Audiometry (AC & Sound proof) Speech Therapy | | Yes/no Yes/no |
| Pediatrics | Child Welfare Clinic Immunization Clinic | | Yes/no Yes/no |

Signatures of the Assessors



 (POSHNA SARKAR)

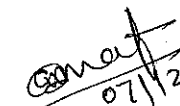
Date



(Dr. M. ME GHA CITA W DRA SINGH)

Date 7-12-18

Signatures of Dean/Principal


 07/12/18

| | | |
|-----------|-----------------------------|----------|
| | Child Rehabilitation Clinic | Yes/no |
| OBS & GYN | Antenatal Clinic | Yes / no |
| | Sterility Clinic | Yes / no |
| | Family Welfare Clinic | Yes / no |
| | Cancer Detection Clinic | Yes/ no |

Comments :

2.5 Total Number Of Teaching Beds (Distance between two beds should be 1.5 m.)

Teaching Hospitals within Campus with Total Beds will be 650 (Planned).

Teaching Hospitals available in Government General Hospital Campus with Total Beds 300.

| Department | Ward Nos. | Beds Required | Total Beds Available | Facilities Available in Each Ward | | | | | | Remarks |
|---------------------------|-----------|---------------|----------------------|-----------------------------------|---------------------|------------|----------------|---------------|-----------------------------|---|
| | | | | Nursing Station Y/N | Exam/Treat Room Y/N | Pantry Y/N | Store Room Y/N | Duty Room Y/N | Demo Room (25 Capacity) Y/N | |
| Gen. Medicine | 3 | 72 | 72 | YES | NO | NO | NO | NO | NO | All the wards are very congested and distance between two beds are less than 1.5 metres |
| Pediatrics | 2 | 24 | 24 | YES | NO | NO | NO | NO | NO | All the wards are very congested and distance between two beds are less than 1.5 metres. No central oxygen, no warmer available |
| TB & Respiratory Medicine | 1 | 08 | 08 | YES | NO | NO | NO | NO | NO | No female ward available |
| Psychiatry | 1 | 08 | 08 | YES | NO | NO | NO | NO | NO | No female ward available |

Signatures of the Assessors

Pusnaa Sonkan
(PUSNAA SONKAN)

Date

M. Meghachandra Sastri
(M. MEGHACHANDRA SASTRI)
7-12-18

Signatures of Dean/Principal

Manoj
7/12/18

| Department | Ward Nos. | Beds Required | Total Beds Available | Facilities Available in Each Ward | | | | | | Remarks |
|---------------|-----------|---------------|----------------------|-----------------------------------|---------------------|------------|----------------|---------------|-----------------------------|---|
| | | | | Nursing Station Y/N | Exam/Treat Room Y/N | Pantry Y/N | Store Room Y/N | Duty Room Y/N | Demo Room (25 Capacity) Y/N | |
| Dermatology | 1 | 08 | 08 | YES | NO | NO | NO | NO | NO | Shared with the ENT department male ward and there is no female ward. |
| Gen. Surgery | 3 | 90 | 90 | YES | NO | YES | YES | YES | NO | Pantry with nursing station combined |
| Orthopedics | 2 | 30 | 30 | YES | NO | YES | YES | YES | NO | Duty room with nursing station combined |
| Ophthalmology | 1 | 10 | 10 | YES | NO | YES | YES | YES | YES | |
| ENT | 1 | 10 | 10 | YES | NO | YES | YES | YES | YES | ENT and PSYCHIATRY Beds are separated by a screen in the same Room. Nursing, Pantry, Store room common for ENT, Psychiatry, Eye |
| OB & GYN | 2 | 40 | 40 | YES | NO | YES | YES | YES | YES | |
| Total | 17 | 300 | 300 | | | | | | | |

2.6 Clinical material (*Random verification to be done by the Assessor).

| Item | On the Day of assessment | Remarks |
|------------------------------|--------------------------|---------|
| O.P.D. attendance at 2.00 PM | 807 | |

Signatures of the Assessors



Pushpa Sharma
(PUSHPA SHARMA)

Date

MEGHACHANDRA SINGH
Date: 7-12-18

Signatures of Dean/Principal

7/12/18

| Item | On the Day of assessment | | Remarks |
|---|--------------------------|-------|---------|
| | O.P. D | I.P.D | |
| On first day | | | |
| Casualty attendance (24 hrs. data) | 68 | | |
| No of admissions | 240 | | |
| No. of discharges | 68 | | |
| Bed occupancy% at 10.00AM on first day | 85% | | |
| <u>Operative Work</u> | | | |
| No, of major surgical operations | 02 | | |
| No. of minor surgical operations | 06 | | |
| No. of normal deliveries | 03 | | |
| No. of caesarian sections | NIL | | |
| <u>Radiological Investigations</u> | | | |
| (No. of patients) | O.P. D | I.P.D | |
| X-ray | 52 | 22 | |
| Ultrasonography | 04 | 11 | |
| Barium, IVP etc. | NIL | NIL | |
| C.T. Scan | 01 | 01 | |

| Item | On the Day of assessment | | Remarks |
|--|--------------------------|-------|---------|
| | O.P. D | I.P.D | |
| Laboratory Investigations - No. of- Patients/ samples | | | |
| Biochemistry | 57 | 34 | |


Signatures of the Assessors

[Signature]
(PUSNA SONUWA)

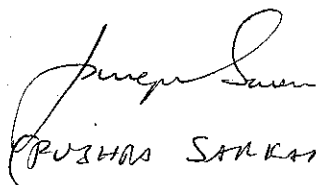
[Signature]
(Dr. M. MEGHACHANDRA SWAMI)
Date 7-12-18

[Signature]
07/12/18
Signatures of Dean/Principal

| Item | On the Day of assessment | | Remarks |
|--|--------------------------|-------|---------|
| | O.P. D | I.P.D | |
| Laboratory Investigations - No. of- Patients/ samples | | | |
| Microbiology | 13 | 06 | |
| Serology | 29 | 22 | |
| Hematology | 111 | 89 | |
| Clinical pathology | 26 | 35 | |
| Histopathology | NIL | 02 | |
| Cytopathology | NIL | 01 | |



Signatures of the Assessors

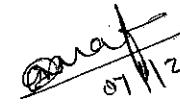


(PRAKASH SANKAR)

Date 7-12-18



(D. M. MEHTA CHANDRA SINGH)



Signatures of Dean/Principal

2.7 Medical Record Section:

Manual/ Computerized: ComputerizedICD X classification of diseases followed for indexing: yes/no: NO

2.8 Central casualty services:

No of Beds: Required: 10 Available: 10

- Number of CMO posted/Shift : 03/3 No. of CMO present during Assessment round: 03
- Number of nurses posted / Shift: 10/3
- Separate casualty for OBGY cases: NO, if yes No. of beds .

| Equipment | Availability Y/N | Number |
|-----------------------------------|---------------------|--------|
| Central Oxygen & suction facility | Yes | 5 |
| Pulse oximeter | Yes | 5 |
| Ambu bag | Yes | 2 |
| Ultrasonography Machine | NO | |
| Disaster trolley | NO | 0 |
| Crash Cart | Yes | 1 |
| Emergency Drug Tray | Yes | 2 |
| Defibrillator | NO | 0 |
| Ventilator | NO | 0 |
| X-ray Unit - (Mobile) | Yes | 1 |
| Minor OT | Yes | 1 |

Comments:


Signatures of the Assessors



(Prerna Singh)


Date

7-12-18



(Dr. M. MEGHA HANDRA SINGH)

Signatures of Dean/Principal



07/12/18

2.9 Clinical Laboratories

Central Clinical Laboratory: Under control of departments of : Pathology

Separate sections for pathology, microbiology, hematology & biochemistry: **Yes Available**

2.10 Operation theatres


| Type | Requirement | Available | Remarks |
|-------|-------------|-----------|---|
| Major | 4 | 5 | Four major OTs in the new block of the hospital is not functioning. One is functioning. |
| Minor | 2 | 1 | |

2.11 Equipment available in O. T. Block (Specify numbers)


| Dept | Theatres Nos. | A/C Y/N | Central Oxy/ Nitrous Oxide Y/N | Anesthesia Machine Y/N | Multipara Monitor with Capnograph Y/N | Defibrillators Y/N | Infusion Pumps Y/N | Remarks |
|-------------|---|------------|--------------------------------|------------------------|---------------------------------------|--------------------|--------------------|--|
| Gen Surgery | 5- Major (4 non functional) And 1 Minor | <u>YES</u> | <u>NO</u> | <u>YES</u> | <u>NO</u> | <u>YES</u> | <u>NO</u> | One major OT is functional only. Only one defibrillator is |
| ENT | | | | | | | | |
| Ophthal | | | | | | | | |
| Ortho | | | | | | | | |
| OBS & GYN | | | | | | | | |
| Emergency | | | | | | | | |

Signatures of the Assessors




(PUSNAA SANKAR)

Date


(Dr. MEGHACHANDRA SANKAR)
7-12-18

Signatures of Dean/Principal

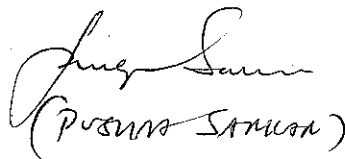

07/12/18


| Dept | Theatres Nos. | A/C Y/N | Central Oxy/ Nitrous Oxide Y/N | Anesthesia Machine Y/N | Multipara Monitor with Capnograph Y/N | Defibrillators Y/N | Infusion Pumps Y/N | Remarks |
|--------|---------------|---------|--------------------------------|------------------------|---------------------------------------|--------------------|--------------------|--|
| Septic | | | | | | | | available and it is functional. All the surgical departments including ENT, Ophthalmology and Obs & Gyne are operating in the same OT in rotation. |

No. of Pre-operative Beds available: 5


No. of Post Operative Beds available : 5

Signatures of the Assessors


(PURNIMA SAMANTA)


(Dr. M. MEQHA (HANDORA SIKRATH))
Date 7-12-18

Signatures of Dean/Principal

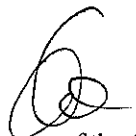

07/12/18

2.12 Intensive Care: Following intensive areas are available -

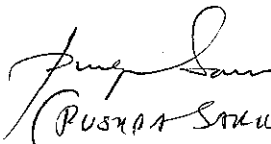
| Type | Beds (Required) | Beds (Available) | Patients on day of assessment | AC Y/N | Central Oxygen/Suction Y/N | Major Equipment (Monitor, Ventilator, ABG, Pulse Oximeter etc.) Y/N | Remarks if any |
|-----------|-----------------|------------------|-------------------------------|------------|----------------------------|---|----------------|
| ICCU | 5 | <u>NIL</u> | | | | | |
| ICU | 5 | <u>05</u> | <u>02</u> | <u>NO</u> | <u>YES</u> | <u>NO</u> | |
| SICU | 5 | <u>05</u> | <u>02</u> | <u>NO</u> | <u>YES</u> | <u>NO</u> | |
| NICU/PICU | 5 | <u>05</u> | <u>05</u> | <u>YES</u> | <u>YES</u> | <u>YES</u> | |

2.13 Labor Room

| Rooms | Beds | Remarks |
|--------------|------|---------|
| Clean Cases | 02 | |
| Septic Cases | 01 | |
| Eclampsia | 01 | |



Signatures of the Assessors



(Pushpa Sakun)



(Dr. M. MEGHACHANDANA SINGH)

Date 7-12-18




07/12/18
Signatures of Dean/Principal

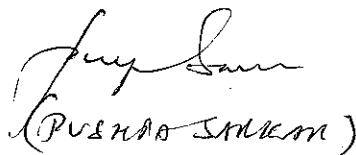
2.14 Radiological Facilities: (Annexure-VII)

| Equipment | Required no. | Available no. | AERB Approval Y/N | Functional Status at the time of assessment Y/N | Remarks if any |
|--|------------------------|---------------------------------------|-------------------|---|----------------|
| Mobile X Ray 60 mA 100 mA | <u>01</u> <u>01</u> | <u>NIL</u> <u>01</u> | <u>YES</u> | <u>YES</u> | |
| Static X Ray 300 mA 600mA 800/1000 mA | <u>01</u> <u>01</u> | <u>02</u> <u>NIL</u> <u>NIL</u> | <u>YES</u> | <u>YES</u> | |
| CT Spiral Minimum 16 slice | <u>0</u> | | | | |


| Equipment | Required no. | Available no. | PNDT Approval Y/N | Functional Status at the time of assessment Y/N | Remarks if any |
|-----------|--------------|---------------|-------------------|---|----------------|
| USG | <u>02</u> | <u>02</u> | <u>Yes</u> | <u>YES</u> | |



Signatures of the Assessors

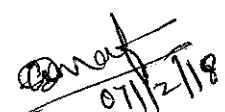


(PUSHD SANKAR)



Dr. MIE SHACHANDRA SIVANI

Date 7-12-18



07/12/18
Signatures of Dean/Principal

2.15 Blood Bank:Available and functional: **Yes/No:**Number of units dispensed in a day: 03-04Number of units stored on day of assessment: **06**License valid up to: 17/03/2020 (LICENCE NUMBER AND COPY TO BE APPENDED AS (ANNEXURE-VIII))Blood Separation Facility - **Available/Not available****2.16 Pharmacy: Pharmacist/Staff available: List to be included: Yes**

SENIOR PHARMACIST: 1. Shri M. M. Patel (Diploma Pharmacy)

Junior pharmacists: 2. Mr. Ishwar Chaudhari (B-Pharm)

3. Mr. Rajesh Chaudhari (B-Pharm)

4. Mrs. Geeta Patel (D-Pharm)

5. Mr. R. J. Chauhan. (D-Pharm)

6. Mr. M. Mansuri (B-Pharm)

- No. of sub-stores located in different parts of hospital: 05

2.17 Central sterilization Department:

- Timings: As OPD Timing & Shifts: 02

- Equipment: Horizontal autoclaves: Yes available / vertical autoclaves: **Yes Available**, ETO Sterilizers: **Yes**


- Separate receiving and distribution points - Yes/No:


2.18 Intercom: Available: yes/no : Yes Available


No. of incoming lines: 01 No. of extension lines: 40

2.19 Central laundry/Alternative Arrangements: Yes Available

 Signatures of the Assessors


 PUSNA SAMRA


 Dr. MEGHA CHANDRA SINGH
 Date 2-12-18


 07/12/18
 Signatures of Dean/Principal

In House/Outsourced: In House

Type of Laundry: Mechanized / Manual: Manual

2.20 Kitchen/ Alternative Arrangements

- In-House/Outsourced : In- House
- Food free of charge: yes/no: Number of patients : 200/ Day
- Provision of special diet: yes/no:
- Services of a nutritionist/dietician: available/~~not available~~: (CMTC- Miss. Priynka Patel)

2.21 (a) Total no. of Canteens: Three (03). For staff: 01 for students: 01 For Patients/Relatives: 01

(b) Total no. of Mess in campus: One (01)

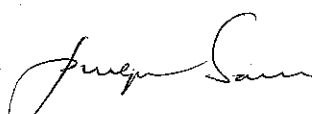
2.22 Arrangements for Biomedical Waste Management. Yes available Outsourced (Annexure-IX)

- Outsourced/~~in-house~~ : Yes Outsourced (if outsourced, append MOU) (If in-house, please specify details of facilities available)

2.23 Central Research Lab: Not required at this stage

- Available - Yes/No: Not applicable
- Facilities - Adequate/Not Adequate: Not applicable
- Research Projects: Not applicable
 - Completed Nos _____
 - Ongoing Nos _____

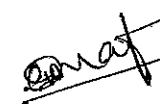
Signatures of the Assessors


PURNIMA SARAN

Date


(M- MEGHA HANDRA SINGH)
7-12-18

Signatures of Dean/Principal

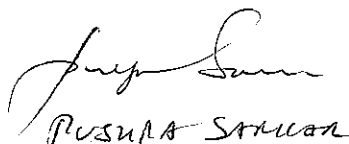

27/12/18

2.24 Nursing and Paramedical staff :


| Nursing staff: Category | No of Beds : 300 | |
|----------------------------|------------------|----------------|
| | Required Nos. | Available Nos. |
| Staff Nurses | 141 | 141 |
| Sister Incharge | 27 | 27 |
| ANS | 4 | 4 |
| DNS | 2 | 2 |
| Nursing Suptd | 1 | 1 |
| Total | 175 | 175 |

| | Required Nos. | Available Nos. |
|--|---------------|----------------|
| Paramedical And Non teaching staff | 100 | 104 |

Signatures of the Assessors

PUSPA SARKAR



(DR M MEGHA CHANDLA SHARMA)

Date 7-12-18

Signatures of Dean/Principal



07/12/18


MEDICAL COLLEGE

3.1 College Website:


| Sr. No. | Details of information | Yes/No |
|---------|--|----------------|
| 1. | Details of Dean / Principal and Medical Superintendent Including their name, qualification complete address with telephone and STD code, fax and E-mail etc. | Yes |
| 2. | Teaching staff, Resident doctors ,non-teaching staff , Technical staff , Nursing staff-- (a)department & designation wise with joining date (b) Unit wise faculty & resident list | Yes |
| 3. | Details of the affiliated university and its Vice-Chancellor and Registrars. | Yes |
| 4. | Citizen Charter | Yes |
| 5. | List of students admitted merit-wise category-wise (UG & PG) for the current and previous year. | Yes |
| 6. | Result of all the examinations of last one year. | Not Applicable |
| 7. | Details of members of the Anti Ragging Committee with contact details including landline Phone, mobile, email etc... | Yes |
| 8. | Details of members of the Gender Harassment Committee with contact details including landline Ph. mobile, email etc... | Yes |
| 9. | Toll free number to report ragging. | Yes |
| 10. | Details of the sanctioned intake capacity of various courses UG as well as PGs by the MCI. (with the scan copies of permission letter) | Yes |
| 11. | Any research publication during the last one year. | Yes |
| 12. | Details of any CME programmes, conferences and/or any academic activities conducted by the institution. | Yes |
| 13. | Details of any awards and achievements received by the students or faculty. | Yes |
| 14. | Detailed status of recognition of all the courses(with the scan copies of permission letter) | Not Applicable |
| 15. | Details of clinical material in the hospital | Yes |
| 16. | unit /dept .wise beds distribution | Yes |

Signatures of the Assessors




PUSPA SARKAR

Date


Dr. M. MEHA CHANDRA SINGH
7-12-18

Signatures of Dean/Principal


07/12/18

3.1 (a) College timings: 9:00 AM To: 5:00 PM (Monday to Friday)
: 9:00 AM To 1:00 PM (Saturday)

3.2 Teaching Programme:

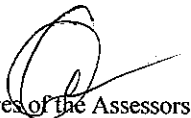
| | | |
|--|--------|----------------|
| Didactic teaching | Yes/No | Yes, |
| Demonstration | Yes/No | Yes |
| Integrated teaching (Horizontal/Vertical teaching) | Yes/No | .NO |
| Clinical posting | Yes/no | Not Applicable |
| Clinical Pathological Conference | Yes/No | Not Applicable |
| Grand Rounds | Yes/No | Not Applicable |
| Statistical Meeting | Yes/No | Not Applicable |
| Seminars | Yes/No | .NO |

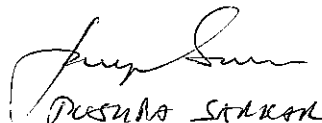
Teaching Facilities:

3.3 Anatomy


| Required | Available | Required | Available |
|---|---|---|--|
| Demonstration Room/s • No: <u>02</u> • Capacity - 75 to 100 students | Available Capacity:60 each | AV Aids: 2 Set | Available(only one set available) |
| • Histology practical laboratory - 01 • Number of Lab seats : <u>90</u> • Number of microscopes: 75 • Dissection Microscopes : 05. | Available(shared with pathology department) Twelve microscope available on | Museum: <u>35</u> seating capacity • Mounted specimens =150 • Models - 112 • Charts: 106 • Bone Sets <u>7</u> Articulated & Disarticulated- <u>30</u> | Available but no seating capacity. Available(30 in number) Available(50 in number) |

Signatures of the Assessors

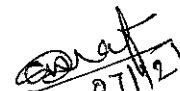



DUSHA SARKAR

Date


Date 7-12-18
Dr. MEGHA CHANDRA SINGH

Signatures of Dean/Principal


07/12/18

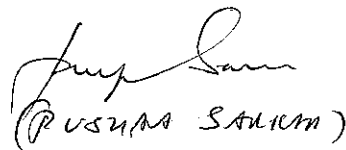
| Required | Available | Required | Available |
|---|--|--|---|
| | display. No dissection microscope available. | • • • • • | Available(02 articulated)(no disarticulated bomnes available) |
| • Dissection Hall (325 Sq mtr) | Available | • MRI & CT - <u>10 plate</u> | CT Available |
| Number of dissection tables - <u>18</u> | Available(NO:15) | Number of cadavers - <u>15</u> | Available(n0 : 10) |
| Cold store / cooling chambers - Capacity 15-18 Bodies | Not Available | Storage tank - <u>03</u> | Available |
| Embalming room - 01 | Available | Band saw | Available |
| Lockers - <u>150</u> | Available | Departmental Library: <u>141</u> books | Available |

Adequate exhaust, light, water supply and drainage facilities - Available/not available.

3.4 Physiology

| Required | Available | Required | Available |
|--|---|------------------------|---------------------------------|
| Demonstration Room/s • No - <u>01</u> • Capacity - 75-100 Students | Available but shared with FSM department. Capacity:75 | AV Aids: 01 Set | Available |
| Mammalian laboratory: | Not Available | Haematology laboratory | Available shared with pathology |

Signatures of the Assessors

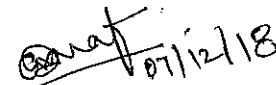

(PUSUMA SANKAR)

Date

7-12-18


(M. MEGHACHANDRA SWAMY)

Signatures of Dean/Principal

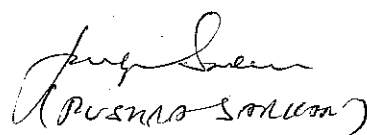

07/12/18

| | | | |
|---|----------------------|--------------------------|--------------------|
| | | | department. |
| Amphibian Laboratory: | Not Available | Clinical Physiology Lab. | Available |
| Departmental Library - 80 Books - 2 Journals | Available | | |


3.5 Biochemistry

| Required | Available | Required | Available |
|--|---|------------------------------------|--|
| Demonstration Room/s • No: 01 • Capacity - 75-100 Students | Available but in different building and sharing with community medicine department. Capacity:50 | AV Aids: 01 Set | Not Available |
| Number of practical laboratory/ies - 01 | Available, no:01 | Library / Seminar rooms - 80-Books | Available but not furnished. Only space available |


Signatures of the Assessors

Date 7-12-18


 M. MEGHACHANDRA SINGH

Signatures of Dean/Principal

 07/12/18

| | | | |
|---------------------------------|-----------|--|--|
| Number of Lab seats - <u>90</u> | Available | | |
|---------------------------------|-----------|--|--|

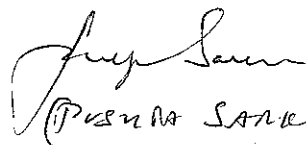
3.6 Pathology:

| Required | Available | Required | Available |
|---|---|--|--|
| Demonstration Room/s • No - <u>01</u> • Capacity - <u>75-100 Students</u> | Available Capacity: 50 | AV Aids: 01 Set | Not Available |
| Practical labs - • Morbid Anatomy/Histopath./ Cytology -01 • Microscopes: <u>90</u> • Clinical Pathology/Hematology - 01 Microscopes: 90 | No Available | Museum:- <u>01 Seating Capacity-40 students</u> Specimens: • Mounted : • Unmounted: • Catalogues = | Demo room and museum has been housed in a single room. Specimen: Mounted:30 Unmounted:nil Catalogue: nil |
| Departmental library - 80-100 Books | Available but in a remote and different building. Seating capacity:06 | | |
| Service Lab - Histopathology/Cytopathology/Hematology/Any specialized work | Not Available | | |


3.7 Microbiology:

| Required | Available | Required | Available |
|----------------------|-----------|------------|---------------|
| Demonstration Room/s | Not | AV Aids:01 | Not Available |


Signatures of the Assessors



(Purna Sarker)

Date


(M. Megha Chandra Singh)
7-12-18

Signatures of Dean/Principal

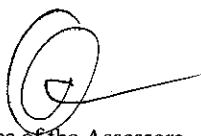

07/12/18

| | | | |
|---|---|---|---------------|
| • No - <u>01</u> • Capacity - <u>75-100 students</u> | Available | | |
| practical laboratory__ Number of Lab seats - <u>90</u> Number of microscopes/laboratory - <u>90</u> | Not Available | Media preparation facility Autoclaving, Washing and drawing room | Not Available |
| Number of service laboratories - <u>07</u> | Not Available | Museum: Specimen, Charts, Models & Catalogue seating capacity- <u>40 Students</u> | Not Available |
| Departmental library - <u>80Books,</u> | Available Seating capacity: <u>07</u> | | |

3.8 Pharmacology:

| Required | Available | Required | Available |
|---|---------------|---|---------------|
| Demonstration Room/s • No - <u>01</u> • Capacity - <u>75-100 students</u> | Not Available | AV Aids:01 | Not Available |
| Experimental Pharmacology | Not Available | Museum: <u>40 seating capacity</u> • Specimens • Charts • Models | Not Available |
| Clinical pharmacology/pharmacy | Not Available | • History of Medicine • Catalogues : | |
| Departmental Library - <u>80Books</u> | Not Available | | |
| Computer Assisted Learning Lab | Not Available | Mannequins | Not available |

Signatures of the Assessors



(RUSNA SARKAR)

Date 24-2-18

(M. MEGHAJANANDA SINGH)

Signatures of Dean/Principal

(Date)
07/12/18

3.9 Forensic Medicine:

| Required | Available | Required | Available |
|--|---------------|---|---------------|
| Demonstration Room/s • No - 01 • Capacity - 75-100 students | Not Available | AV Aids:01 | Available |
| Forensic Medicine Practical Lab | Not Available | Museum : 40-50 Students • Medico-Legal Specimens <u>for 40-50 students</u> • Charts: <u>for 40-50 students</u> • Prototype fire arms: <u>for 40-50 students</u> • Slides: <u>for 40-50 students</u> • Poisons: <u>for 40-50 students</u> • Photographs: <u>for 40-50 students</u> Catalogues: <u>15 copies</u> | Not Available |
| Autopsy Block. Location - In/Near-hospital in a separate structure. | Not Available | | |
| Cold storage/ Cabinet -01 Capacity of 02 Bodies | Not Available | | |
| Departmental library - 80 Books | Not Available | | |

3.10 Community Medicine:

| Required | Available | Required | Available |
|--|--|-------------------|---------------|
| Demonstration Room/s • No - 01 • Capacity - 75-100 students | Shared with biochemistry department and total capacity of the room is 50 | AV Aids:01 Set | Not Available |
| Museum: 01 • Charts : As per Required • Models: As per Required • Specimens : As per Required • Catalogues : As per Required | Not Available | Practical lab - 1 | Not Available |
| Departmental Library - 80Books | Available but not furnished | | |

Signatures of the Assessors



Jay Kumar
(PUSNA SAKHIA)

Date

MS
Dr. M. MEQ HACHANDRA SINGH
7-12-18

Signatures of Dean/Principal

MS
07/12/18

3.11 Health Centers (Department of Community Medicine): Identified (Annexure-X)

1. RHTC: Primary Health Centre, **Jalotra**, (Vadgam),(Place) : 18 KM (Distance from the college)
2. Primary Health Centre, **Dabhela**, (Amirgadh),(Place): 23 KM (Distance from the college)
3. Primary Health Centre, **Vaghrol**, (Dantiwada) (place): 23 KM (Distance from the college)

| | |
|--|----------------------|
| Population covered by the RHTC | 6822 |
| It is affiliated to College Yes/No | Yes |
| No. of Students: 150 (Visit per batch throughout the year) No. of Interns <u>NA</u> Posted per batch throughout the year | Not applicable |
| Separate blocks for accommodating boys in <u>1</u> rooms having <u>10</u> beds. Girls <u>1</u> rooms having <u>10</u> beds.(For Interns) | <u>Not Available</u> |
| Facilities for cooking & dining - Yes/No | No |
| Daily OPD | 20-30 |
| Specialist visits if any | Not available |
| Cold chain equipment available | Yes, |
| Survey/MCH/Immunization/FP registers | Yes, |
| Activities under the National Health Programmes | Yes, |

Signatures of the Assessors



Prusna Sankar
PRUSNA SANKAR

Date

Megha Handra Singh
(M-MEGHAHANDRA SINGH)
Date 7-12-18

Signatures of Dean/Principal

07/12/18

3.12 Details of U.H.T.C.: **Banas dairy Employee Health Centre** Place: Jagana, (Palnapur)
Distance from college: 6 km

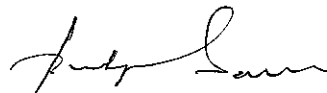
| | |
|--|-----------------------|
| Population covered by the UHC | 5000 |
| It is affiliated to College Yes/No | Yes |
| Daily OPD | 20-25 |
| Diagnostics camps | Yes |
| Survey/MCH/Immunization/FP registers | <u>YES</u> |
| Specialist visits if any | <u>Not available</u> |
| No. of Students and interns posted in batches of | <u>NOT APPLICABLE</u> |
| Deficiency if any | - |

3.13 CONDUCT OF III MBBS EXAMINATION_(only for recognition under 11(2)) Not applicable at this stage


- University which conducts Examination: Not applicable
- No. of Candidates appeared in Examination: Not applicable
- The III MBBS examination (Part-II) was conducted satisfactorily: yes/no: Not applicable
- Centre for written/practical examination: Not applicable

Signatures of the Assessors




PURNIMA LAKSHMI

Date 7-12-18


(B. M. MEGHACHANDRA SOREH)

Signatures of Dean/Principal


07/12/18

- Was the standard sufficient for MBBS Examination as required by Regulations of the Medical Council of India? Not applicable at this stage

3.14

Medical College-Staff Strength:Name of College: Banas Medical college & Research Institute, Palanpur (BK), Gujarat

Number of students - 150, PG Courses (Yes/No)

Calculation Sheet (Date:07.12.2018)

| Department | Designation | Requirement as per MSR (UG) | Additional faculty required for running PG courses (if any) | Total (UG + PG) | Accepted | Deficiency |
|--------------|--------------|-----------------------------|---|-----------------|----------|-------------|
| Anatomy | Professor | 1 | | 1 | 2 | |
| | Assoc. Prof. | 1 | | 1 | 3 | |
| | Asstt.Prof. | 2 | | 2 | NIL | COMPENSATED |
| | Tutor | 3 | | 3 | 3 | |
| Physiology | Professor | 1 | | 1 | 1 | |
| | Assoc. Prof. | 1 | | 1 | 3 | |
| | Asstt.Prof. | 2 | | 2 | 1 | COMPENSATED |
| | Tutor | 3 | | 3 | 2 | 01 |
| Biochemistry | Professor | 1 | | 1 | NIL | 01 |
| | Assoc. Prof. | 1 | | 1 | 2 | |
| | Asstt.Prof. | 2 | | 2 | 2 | |
| | Tutor | 4 | | 4 | 3 | 01 |
| Pharmacology | Professor | 1 | | 1 | NIL | 01 |
| | Assoc. Prof. | 1 | | 1 | 1 | |
| | Asstt.Prof. | 2 | | 2 | 2 | |
| | Tutor | 3 | | 3 | 4 | |
| Pathology | Professor | 1 | | 1 | 2 | |
| | Assoc. Prof. | 3 | | 3 | 1 | 01 |

Signatures of the Assessors



Judy Samra
PUSNAI SAMRA

Date


MSA
M. NEGHACHANDRA (M.F.H.)
7-12-18


Signatures of Dean/Principal


Sanjay
07/12/18

| | | | | | | |
|---|-------------------------------------|---|--|---|-----|-------------|
| | Asstt.Prof. | 3 | | 3 | 3 | |
| | Tutor | 5 | | 5 | 3 | 02 |
| Microbiology | Professor | 1 | | 1 | 1 | |
| | Assoc. Prof. | 1 | | 1 | 1 | |
| | Asstt.Prof. | 2 | | 2 | 2 | |
| | Tutor | 4 | | 4 | 4 | |
| Forensic Medicine | Professor | 1 | | 1 | 1 | |
| | Assoc. Prof. | 1 | | 1 | 1 | |
| | Asstt.Prof. | 1 | | 1 | 2 | |
| | Tutor | 1 | | 1 | NIL | 01 |
| Community Medicine | Professor | 1 | | 1 | NIL | 01 |
| | Assoc. Prof. | 2 | | 2 | 1 | 01 |
| | Asstt.Prof. | 3 | | 3 | 4 | |
| | Epidemio-Logist-Cum- Asstt.Prof. | 1 | | 1 | NIL | 01 |
| | Statistician-Cum-Tutor | 1 | | 1 | 1 | |
| | Tutor | 1 | | 1 | nil | 01 |
| General Medicine | Professor | 1 | | 1 | 1 | |
| | Assoc. Prof. | 2 | | 2 | 1 | 01 |
| | Asstt.Prof. | 3 | | 3 | 3 | |
| | Sr. Resident | 3 | | 3 | 2 | 01 |
| | Jr. Resident | 6 | | 6 | 4 | 02 |
| Paediatrics | Professor | - | | - | NIL | |
| | Assoc. Prof. | 1 | | 1 | 1 | |
| | Asstt.Prof. | 1 | | 1 | 2 | |
| | Sr. Resident | 1 | | 1 | 2 | |
| | Jr. Resident | 2 | | 2 | 1 | COMPENSATED |
| Tuberculosis & Respiratory Diseases | Professor | - | | - | NIL | |
| | Assoc. Prof. | - | | - | NIL | |
| | Asstt.Prof. | 1 | | 1 | 1 | |
| | Sr. Resident | 1 | | 1 | 1 | |
| | Jr. Resident | 1 | | 1 | 1 | |

Signatures of the Assessors

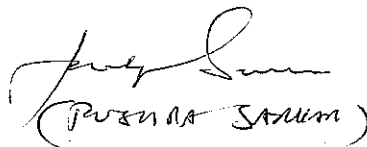

 Jyoti Suman
 (PVS/DA Suman)


 M. MEGHACHANDRA SINGH
 Date 2-12-18


 07/12/18
 Signatures of Dean/Principal

| | | | | | | |
|--|--------------|---|---|---|-----|-------------|
| Dermatology, Venereology & Leprosy | Professor | - | - | - | NIL | |
| | Assoc. Prof. | - | - | - | NIL | |
| | Asstt.Prof. | 1 | | 1 | 1 | |
| | Sr. Resident | 1 | | 1 | NIL | 01 |
| | Jr. Resident | 1 | | 1 | 1 | |
| Psychiatry | Professor | - | - | - | NIL | |
| | Assoc. Prof. | - | - | - | NIL | |
| | Asstt.Prof. | 1 | | 1 | 1 | |
| | Sr. Resident | 1 | | 1 | 2 | |
| | Jr. Resident | 1 | | 1 | NIL | COMPENSATED |
| General Surgery | Professor | 1 | | 1 | 2 | |
| | Assoc. Prof. | 2 | | 2 | 2 | |
| | Asstt.Prof. | 3 | | 3 | 7 | |
| | Sr. Resident | 3 | | 3 | 2 | 01 |
| | Jr. Resident | 6 | | 6 | 6 | |
| Orthopaedics | Professor | - | - | - | NIL | |
| | Assoc. Prof. | 1 | | 1 | NIL | 01 |
| | Asstt.Prof. | 1 | | 1 | 3 | |
| | Sr. Resident | 1 | | 1 | 4 | |
| | Jr. Resident | 2 | | 2 | 2 | |
| Oto-Rhino- Laryngology | Professor | - | - | - | NIL | |
| | Assoc. Prof. | - | - | - | NIL | |
| | Asstt.Prof. | 1 | | 1 | 4 | |
| | Sr. Resident | 1 | | 1 | 2 | |
| | Jr. Resident | 1 | | 1 | 2 | |
| Ophthalmology | Professor | - | - | - | NIL | |
| | Assoc. Prof. | - | - | - | NIL | |
| | Asstt.Prof. | 1 | | 1 | 2 | |
| | Sr. Resident | 1 | | 1 | NIL | 01 |
| | Jr. Resident | 1 | | 1 | 1 | |
| Obstetrics & Gynaecology | Professor | 1 | | 1 | 2 | |
| | Assoc. Prof. | 1 | | 1 | 1 | |

Signatures of the Assessors

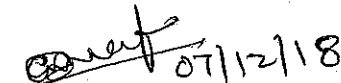



(PURNIMA SAHNI)

Date

MS
(Dr. M. MEETHA CHANDRA SINGH)
7-12-18

Signatures of Dean/Principal



07/12/18

| | | | | | | |
|-----------------|--------------|---|--|---|-----|----|
| | Asstt.Prof. | 2 | | 2 | 2 | |
| | Sr. Resident | 2 | | 2 | 2 | |
| | Jr. Resident | 4 | | 4 | 4 | |
| Anaesthesiology | Professor | - | | - | NIL | |
| | Assoc. Prof. | 2 | | 2 | 1 | 01 |
| | Asstt.Prof. | 2 | | 2 | 3 | |
| | Sr. Resident | 2 | | 2 | 3 | |
| | Jr. Resident | 2 | | 2 | 2 | |
| Radio-Diagnosis | Professor | - | | - | NIL | |
| | Assoc. Prof. | 1 | | 1 | NIL | 01 |
| | Asstt.Prof. | 1 | | 1 | 2 | |
| | Sr. Resident | 2 | | 2 | 2 | |
| Dentistry | Professor | - | | - | NIL | |
| | Assoc. Prof. | - | | - | NIL | |
| | Asstt.Prof. | 1 | | 1 | 1 | |
| | JR | 1 | | 1 | 1 | |

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:

3.15 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.

© 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

Signatures of the Assessors

[Handwritten Signatures]
RUBINA SHAM

Date

7-12-18

[Handwritten Signature]
(B.M. MEERHACHANDRA SINGH)

Signatures of Dean/Principal

[Handwritten Signature]
5-7/12/18

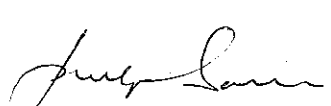
| |
|---|
| cannot compensate the deficiency of Associate Professor or Professor. |
| (d) Excess/Extra teaching faculty of any department cannot compensate the deficiency of any teaching faculty in any other department. |
| (B) For Resident Doctors: |
| (a) Excess of SR can be compensated to the deficiency 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. |
| © 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. |
| (3) Colleges running PG program require additional staff, beds & other requirements as per the PG Regulations - 2000. |


3.16 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. | DR SURESH RATHI | ASSISTANT PROFESSOR CUM EPIDEMIOLOGIST | COMMUNITY MEDICINE | M.Sc (epidemiology, from AGA KHAN UNIVERSITY, PAKISTAN) is not ACCEPTABLE AS PER MCI GUIDE LINES. |
| 2. | DR RASHID KHAN PATHAN | SR | GENERAL MEDICINE | NOT STAYING INSIDE CAMPUS IN RESIDENT HOSTEL |

Signatures of the Assessors


P. S. KUMAR


Date (M. H. Acharya)
7-12-18


Signatures of Dean/Principal

| | | | | |
|-----|-------------------------|---------------------|------------------|---|
| 3. | DR RAJESH R PATEL | SR | GENERAL MEDICINE | NOT STAYING INSIDE CAMPUS IN RESIDENT HOSTEL |
| 4. | DR AMBARISH PANCHSARA | SR | GENERAL MEDICINE | NOT STAYING INSIDE CAMPUS IN RESIDENT HOSTEL |
| 5. | DR PRAVEENCHANDRA PATEL | SR | GENERAL MEDICINE | NOT STAYING INSIDE CAMPUS IN RESIDENT HOSTEL |
| 6. | DR HARDIK SONI | TUTOR | ANATOMY | APPEARED FOR MCI FOR ASSESSMENT IN PREVIOUS INSTITUTION |
| 7. | DR B D BASVECHA | TUTOR | BIOCHEMISTRY | GROSS PAY DISPARITY (only Rs.3500 per month) |
| 8. | DR SHIBRAM BHAI PATEL | TUTOR | PHYSIOLOGY | SALARY NOT CONSISTENT (RS.9677 FOR FIVE MONTHS FOR 2017-18) SALARY PARTICULARS NOT ENTERED FOR CURRENT YEAR |
| 9. | DR BHARAT M CHOUDHURY | ASSISTANT PROFESSOR | PATHOLOGY | SALARY NOT CONSISTENT (RS.51,071 FOR 10 MONTHS IN FORM 16) SALARY PARTICULARS NOT CONSISTENT FOR CURRENT YEAR |
| 10. | DR JIGNESH RAVAL | TUTOR | PATHOLOGY | SALARY PARTICULARS NOT CONSISTENT FOR CURRENT YEAR |

3.16 1) Deficiency of Teaching Faculty: 17%

2) Deficiency of Resident doctors: 12.7%

3.17 Status of discharge notice/notices issued in respect of irregular admissions (UG/PG) if any.

Signatures of the Assessors

[Handwritten Signature]
PUSNA SHARMA

Date

[Handwritten Signature]
DR. M. MEGHACHANDRA SOWH
7-12-18

Signatures of Dean/Principal

[Handwritten Signature]
07/12/18

Summary of Assessment

1. Banas Medical College and Research Institute Palanpur, Gujarat (College Name), is run by Government/√Trust (In public - private partnership with Govt. of Gujarat))/ Society/Company

2. The college has got LOP from GOI/MCI with intake of: 150 seats for last academic year 2018-19.

3. Type of assessment: 1st renewal No. of seats: 150

4. PG courses : Yes/ No:

5. Deficiency of teaching staff if any:

Shortage of teaching faculty is 17%

6. Deficiency of resident doctors if any:

Shortage of resident doctors is : 12.7%

7. Deficiency of the infrastructure of college and hospital If any: Pl. mention category wise:

Operation Theatres: not functional in four OT.

Demonstration rooms: number and capacity inadequate, AV aids not available

Practical labs: in few department not available

Wards: Congested, no separate male and female ward in psychiatry, dermatology, respiratory medicine.

No separate rooms for teaching/examination, duty rooms, pantry, store rooms in some wards

Signatures of the Assessors

(PUSHA SANKAR)

Date

7-12-18

(DR. M. MEGHACHANDRA SINGH)

Signatures of Dean/Principal

(DR. M. MEGHACHANDRA SINGH)
07/12/18

Paraclinical departments are still occupied by district health officers.

8. Deficiency of clinical material If any: Pl mention category wise; central oxygen in pediatric ward.

9. Any other Remarks: 1. Wards are very congested.

2. Wards are very small and like small rooms


3. Cleanliness is very poor

4. Many of the residents are not staying in their resident hostel

5. Resident hostels are very dirty and not in a position to habitate.



Signatures of the Assessors

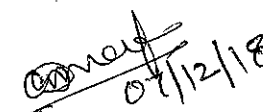


PUSHA SARKAR



(Dr. MEGHA CHANDRA SINGH)

Date 7-12-18



07/12/18

Signatures of Dean/Principal

From: The Principal

Banas Medical College And Research Institute,
Palanpur, Gujarat,

To: The secretary

Medical council of india
Dwarka, phase 1, Pocket-14, sector-8
New delhi-110077

Ref: MCI-34(41)(ug)(R-3)/ 2019-20-Med./

DATED:03-12-2018

ACKNOWLEDGEMENT

I hereby acknowledge that I have received one original copy of the assessment report (duly filled & signed) from Prof Arun Kumar De, MCI co-coordinator for the said assessment conducted on 6TH & 7TH DECEMBER 2018 for the renewal of 150 MBBS seats second batch at. Banas Medical College And Research Institute, Palanpur, Gujarat.

I have nothing to contradict.


Principal

Banas Medical College And Research Institute,
Palanpur, Gujarat .

Dean
Banas Medical College
& Research Institute
Palanpur-385001

Dated: 7.12..2018

To

The secretary

Medical council of India

Dwarka, phase 1, Pocket-14, sector-8

New delhi-110077

Subject: **submission of assessment report**

Ref: MCI-34(41)(ug)(R-3)/ 2019-20-Med./

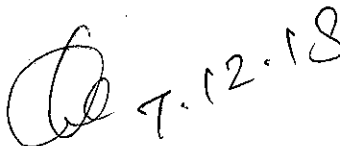
DATED:03-12-2018

Sir,

In pursuance of the above mentioned letter & subject, I am here by submitting the assessment report in connection with the assessment of the physical and other teaching facilities for renewal of permission of second batch 150 MBBS seats at BANAS MEDICAL COLLEGE AND RESEARCH INSTITUTE, PALANPUR, GUJARAT, conducted on 6TH AND 7TH DECEMBER, 2018 .

With regards

Yours faithfully


(PROF ARUN KUMAR DE)

MCI CO-ORDINATOR Enclosures:

PACKET A:

1. SAF II (DULY FILLED & SIGNED)
2. ANNEXURES
3. SOFT COPY OF ASSESSMENT REPORT & VIDEOGRAPHY
4. CONFLICT OF INTEREST
5. CHECK LIST
6. AI FORM

Packet B:

1. FORM A
2. FORM B
3. DECLARATION FORM