MEDICAL COUNCIL OF INDIA

04. No. 183920 dt 2013/17

ASSESSMENT FORM FOR 150- MBBS ADMISSIONS REPORT

Verification of Compliance Part - A-III (2017-18) (to be filled by the Assessors)

Receivior Com of

SAF III

17/3/17

1. Type of Assessment

U/S 10A- Compliance:

U/S 11- Recognition - Compliance ✓

2.

Name of the Institution	:	DHANALAKSHMI SRINIVASAN MEDICAL COLLEGE AND HOSPITAL
Address	:	NH-45, TRICHY CHENNAI HIGHWAYS, SIRUVACHUR, PERAMBALUR – 621 113
Telephone No.	:	04328-254500
E-mail	*	dsmedicalcollege@gmail.com
Council Letter No & Date	:	No.MCI-34(41)(UG)(Recg-13)/2016-Med/. & 17.03.2017

Dr. Utpal Kumar Datta

Dr. Balkrishna B.Adsul

Signature of Assessors

Dr. Ashok Anand

Date 10.3.2810

Signature of Dean/Principal

Assessment Date:	17/	03/2017	Last Assessment Date :	2 nd August, 2016
G Courses	:	Yes. (Anatomy, Physic Community Medicine)		ology, Pathology, Microbiology &

3. Particulars of Assessors

Name of the Assessors	Correspondence Address	Contact No	Email
Dr. Ashok Anand	Professor & Head	09869183134	Ashokanand1616@gmail.com
	Deptt. of Obstetrics & Gynaecology,	09702320033	draranand@yahoo.co.in
	Grant Medical College,		,
	Mumbai, Maharashtra		
Dr. Balkrishna B.Adsul	Professor,	09323960489	adsulbb@gmail.com
	Deptt. of Community Medicine,		
·	Lokmanya Tilak Municipal Medical		
· · · · · · · · · · · · · · · · · · ·	College,		
	Sion, Mumbai, Maharashtra		
Dr. Utpal Kumar Datta	Professor & Head,	09433314385	drutpaldatta@yahoo.com
	Department of Physiology,		
	Institute of Postgraduate Med. Education		
	& Research,		
	Kolkata, West Bengal		

Dr. Utpal Kumar Datta

Dr. Bałkrishna B.Adsul

Signature of Assessors

Dr. Ashok Anand

Date

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DEAN

4. Verification of compliance submitted by institute:

Sr. No.	Deficiencies reported from GOI/MCI	Compliance by College sent to GOI/MCI	Remarks of the Assessors after the assessment	
1	Deficiency of faculty is 57.78% as detailed in the report	It is submitted that the deficiency of the faculty i.e. 57.78% as observed is not there, because of the reasons mentioned below. 1. The Inspectors informed the Dean to assemble all the faculties for attendance between 10 to 11.a.m. 2. Among three inspectors, one inspector started taking attendance from 10.15 a.m. 3. The faculty arrived for marking the attendance in the lecture hall and within the given time period majority of them could not sign with the others since the inspector closed the attendance by 11.00.a.m	There were 3.70 % deficiency in teaching faculty (5 out of 135)	
2	Shortage of Residents is 74.12% as detailed in the report.	 The Inspectors informed the Dean to assemble all the residents for attendance between 10 to 11.a.m. Among three inspectors, one inspector started taking attendance from 10.15 a.m. The faculty arrived for marking the attendance in the lecture hall and within the given time period majority of them could not sign with the others since the inspector closed the attendance by 11.00.a.m 	Deficiency Rectified There were 85 residents against required 85 resident doctors	

Dr. Utpal Kumar Datta

Dr.

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3	During verification Faculty & Residents have produced photocopy of telephone bill which were found to be fake. Nobody produced original bill. They were not knowing their own number, confessed that institute had given this to them today. Dean has not signed on these in most of the forms. These faculty and residents were not considered.	Due to surprise inspection, the faculties are not able to produce their original bills as they are not having with them. A copy of letter issued by the Telecom Deputy General Manager, Trichy for BSNL telephone numbers is also enclosed as Annexure – I.	During the verification of faculty and resident doctors, all of them had produced required ID proof and documents for residence identifications. Hence, deficiency rectified.
4	Resident hostel was visited by all assessors on 2 nd day in the morning. No male residents except one (SR of Emergency Medicine) were staying in room. Only 19 ladies residents were found to be staying. However, this was also doubtful as no water cooler on any floor, no lift for a G+5 floors building, no mess (only small dining area).	by morning 10.00 a.m., almost all the residents were in the duty at the hospital. When the residents were asked to come from their duty at the hospital, the assessors completed their visit.	There were 32 rooms for Male Residents and 20 rooms for Female residents of double occupancy which will occupy 64 male resident doctors and 40 female resident doctors. All required facilities are available in both male and female resident quarters as per requirements. Mess facilities available with adequate sitting arrangements. Complied with

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		Dining hall with seating capacity of approximately 80 is available.	
		Still photograph of the dining hall and lift is enclosed as Annexure – III.	
5	Many faculty members and residents are commuting from villages / towns which are 35km to 60kms from institute. Their daily presence and work in institute is questionable.	Our hospital is located in rural area. Many of our faculties are regularly coming from Perambalur, Ariyalur, and Trichy. The faculty members who are commuting from adjacent areas of Perambalur and Trichy have been provided with adequate transport by the institution to commute.	Complied with
6	OPD attendance as verified by assessors was 350 on day of assessment against requirement of 1,200. When assessors reached the institute, there were hardly 10-15 patients in the whole OPD block. Afterwards, institute brought healthy people for inflating the OPD statistics.	When the assessors arrived at OPD registration counters by 10.00 am, few patients were waiting. However since the majority of the patients are coming to the hospital from rural areas, the flow in the OPD picks up after 11.00 a.m only. OPD attendance on the day of assessment was more than 1250 by 04:00pm, but during the assessors visit to central OP registration they have noted OPD attendance as 350 which was old patients data alone instead of 1090 (i.e New-749, Old:341) by 1.00 p.m. By 4.00.pm. the OPD attendance was 1485. Copy of OPD registration details of 11 th and 12 th April, 2016 and last six months average OPD details are attached as Annexure – IV.	Sufficient numbers of patients were present in OPDs during the inspection hours.

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7	Bed occupancy was 46.6% on day of assessment against 75% required. There was unnecessarily prolonged admission in many cases.	In fact Bed Occupancy was 79% (515 patients) during the assessor rounds at 10.30 a.m. to Indoor wards. The assessors visited only few of the wards and noted the figure 303. Bed occupancy report of last six months is attached along with the data of the day of inspection i.e 11 th and 12 th April, 2016 as Annexure – V.	Bed occupancy on the day of
8	There were only 6 Major & NIL minor operations for the whole hospital on day of assessment. There was NIL operation on Orthopaedics, Ophthalmology.	Institute has 9 Major and 3 Minor O.Ts. Actual surgeries performed by the end of the day were 18 Majors & 15 Minors. OT list for 11 th April, 2016 and photographs of all OTs is attached as Annexure –VI.	There were 10 Major Surgeries (6 Ongoing and 4 waiting) and 11 Minor surgeries on the day of assessment.
9	There was NIL Normal Delivery & NIL Caesarean section on day of assessment.	At the time of visit to the Labour Complex by the assessors, no deliveries were performed. However, after 12.30 p.m. 2 normal deliveries took place. A photocopy of the relevant portion of the delivery register is enclosed along with the birth intimation form sent to the village authorities, attached as Annexure – VII.	There were 4 patients in labour room at the time of inspection. One patient was posted for cesarean section which was found to be justified.
10	Data of OPD attendance, Casualty attendance, Number of patients admitted, Laboratory investigations workload provided by institute are highly inflated.	The data provided by the institution was genuine and not inflated as reported. Data of OPD attendance, casualty attendance, admitted patients investigations for the last six months is enclosed as Annexure – VIII.	OPD & Casualty data is attached
11	Workload of special investigations like, Ba, IVP was NIL on day of assessment.	4 special investigations carried out on the day of assessment. List is attached as Annexure – IX.	Workload of special investigations like, Ba, IVP was NIL on the day of assessment.

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12	Workload of CT Scan was only 02 for the whole hospital on day of assessment.	Regarding CT scan observations, at the time when the assessors went to the radiology department at 10.30. a.m., two scans had already been conducted. There were many more cases who were waiting in the waiting area, which were completed thereafter. List of the CT scans carried out on 11 th and 12 th April, 2016 is enclosed as Annexure-X along with the patients name.	There were 18 CT scans on the
13	Casualty: There is only 1 CMO available against 4 required. Disaster trolley is not available.	4 CMOs are available as full time employees of the institution as per the list enclosed – Annexure XI. The duty roaster and still photograph is also enclosed for the evidence of disaster trolley as Annexure – XII.	4 CMOs are posted in casualty as per roaster duties. Complied with
14	Central Clinical Laboratory is under control of Medical Superintendent & not under control of a department.	The central clinical labs are under the control of the respective 3 Heads of the department.	The Central Clinical laboratory is under control of Professor and HOD of Pathology Dept.
15	OT: Equipment like Defibrillators, Infusion pumps are inadequate.	List of equipments available in the OT including the defibrillators and infusion pumps etc is enclosed at Annexure – XIII.	Complied with
16	ICUs: There were only 2 patients in SICU. All healthy persons were kept in MICU & PICU. There was no admission after 06/04/2016, implying the patients were kept for prolonged period without need of ventilator.	It is submitted that only the patients requiring ICU treatments are admitted to these areas based on their actual condition. Emergency admissions are made through the Casualty after the OPD hours and patients requiring ICU treatment are shifted from the wards who need ICU treatment at the discretion of the treating physicians. List of the patients in various ICUs on 11 th and 12 th Apirl, 2016 enclosed at Annexure – XIV.	ICCU – 5 patients in 5 beds MICU – 5 patients in 5 beds PICU – 4 patients out of 5 beds SICU – 4 patients out of 5 beds NICU – 2 babies out of 3 beds

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17	Labour Room: One patient was kept in Eclampsia room without any indication.	There were two patients in eclampsia room and as per the observation / remark for one of the patient; explanation from the gynaecologist is enclosed at Annexure – XV.	There were 4 patients in labor room.
18	Central Research Laboratory: Facilities & Equipment are inadequate.	List of the equipments and facilities available in the Central Research Lab attached as Annexure – XVI.	Complied with
19	Central Library: One of the Reading Room (Outside) is not air-conditioned. Capacity of Reading Room for Residents is only 16 against 50 required.	The outside reading room has now been provided with air-conditioners. Still Photograph is enclosed at Annexure – XVII. Capacity of the reading room for residents in the Central Library has been increased as per the observation to 50. Still Photograph is enclosed as Annexure – XVIII.	Complied with
20	Common room for Boys & Girls are empty without furniture. Toilet in Girls' Common Room needs repair.	Both Boys and Girls common rooms were furnished with adequate furniture and toilet facilities. Still photograph is enclosed as Annexure – XIX.	1
21	Central Photography Section: There is not staff or equipment. 3 persons with video camera & still camera were present but they did not have photo ID of the institute. College did not provide videography or still photography during assessment.	Adequate staff members are available and the list is enclosed as Annexure – XX. Still photograph of the photographic section is enclosed as Annexure – XXI.	Complied with
22	Student's Hostels: Rooms are smaller than required. Triple seated rooms are 21-22 sq.m. against 27 sq.m. required	Adequate number of rooms is available in both boys and girls hostel as per the MCI norms. The details of hostel facilities are enclosed as Annexure	There were 130 rooms each for boys and girls of double occupancy with adequate room size as per MSR.

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Dhanalakshmi Srinivasan Medical College Hospital, Siguvachur, Perambalur -621 212.

Date

	@9sq.m/student. Double seated rooms are	- XXII.	
	14.58 sq.m. against 18 sq.m. required.		Complied with
23	Nurses' Hostel: Available accommodation is for 72 Nurses against 75 required.	Accommodation for the nurses in the nursing hostel is available for 80 nurses.	There were 40 room of double occupancy for 80 nurses with adequate facilities. Complied with
24	Wards: Ancillary facilities are non- functional in many wards. Toilets are dirty & choked up.	All the ancillary facilities along with the wards are functional and the toilets are neat and clean.	The wards had all required ancillary facilities which are functional.
25	Pathology Department: Service laboratories are not available.	All the service labs of the pathology department were available. Still photograph is enclosed as Annexure – XXIII.	Service laboratory facilities were available in hospital which is under the control of Professor & HOD of Pathology Dept.
26	Microbiology Department: Only 2 Service laboratories are available against requirement of 7.	All the 7 labs of Microbiology department were available. Still photograph is enclosed as Annexure – XXIV.	All the 7 labs of Microbiology department were available and functional.
27	RHTC: Posting register of students was not available. Mess is non-functional.	The posting register of the students was available. Copy of posting register is attached as Annexure – XXV. The mess in the RHTC is functional. Still photograph is enclosed as Annexure – XXVI.	Complied with
28	UHC: Posting register of students is not available. There is no proper registration for Specialty clinics.	The posting register of the students was available. Copy of posting register is attached as Annexure – XXVII. Proper registration for the speciality clinics is also maintained.	Complied with

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20	Other deficiencies as pointed out in the		
29	assessment report.	All deficiencies answered and stand replied as rectified.	Nil
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5. Clinical material:

Item	On D	ay of assessment	Remarks
O.P.D. attendance at 2.PM on			Data provided by institute.
first day			_ ,
Casualty attendance		65	
(24 hrs. data)			
No of admissions		82	·
No. of discharges		79	
Bed occupancy% at 10.00 AM	75.38 %	(490 patients out of	
on first day		650 beds)	
Operative Work			
No, of major surgical operations	10 (Ongoing 6, waiting 4)		
No. of minor surgical operations	11		
No. of normal deliveries	4		
No. of caesarian sections	1		
Radiological Investigations	O.P. D	I.P.D	
X-ray	143	41	
Ultrasonography	34	15	
Barium, IVP etc.	nil	nil	
C.T. Scan		18	

Not 3.

Dr. Utpal Kumar Datta

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Item	1	ay of ssment	Remarks
Laboratory Investigations - No. of Tests	O.P. D	I.P.D	Data provided by institute.
Biochemistry	569	291	
Microbiology	142	35	
Serology	270	84	
Hematology	715	325	
Histopathology		14	
Cytopathology	35		

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6. Medical College-Staff Strength:

Name of College: DHANALAKSHMI SRINIVASAN MEDICAL COLLEGE AND HOSPITAL

Number of students - PG Courses - Yes (Anatomy, Physiology, Biochemistry, Pharmacology, Pathology, Microbiology & Community Medicine)

Calculation Sheet (Date:17.03.2017)

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	
Anatomy	Assoc. Prof.	1		1	2	
Anatomy	Asstt.Prof.	2		2.	2	
	Tutor	3		3	3	
	Professor	1		1	1	
Physiology	Assoc. Prof.	1		1	2	
Thysiology	Asstt.Prof.	2		2	1	
	Tutor	3		3	3	
	Professor	1		1	1	
Riochomistr	Assoc. Prof.	1		1	1	
Biochemistry	Asstt.Prof.	2		2	3	
	Tutor	4		4	3	
Pharmagalagy	Professor	. 1		1	1	
Pharmacology	Assoc. Prof.	1		1	1	

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Medical College Hospital, Siruvachur, Perambalur -621 212.

	Asstt.Prof.	2		. 2	2	
	Tutor	3		3	3	
	Professor	1		1	2	
	Assoc. Prof.	3	1	4	2	1
Pathology	Asstt.Prof.	3	1	4	4	-
	Tutor	5	1	6	6	
	Professor	1		1	1	
Microbiology	Assoc. Prof.	1		1	2	
Microbiology	Asstt.Prof.	2		2	2	
· 	Tutor	4		4	4	
	Professor	1		1	1	
Forensic Medicine	Assoc. Prof.	1		1	1	
rorensic Medicine	Asstt.Prof.	1		1	1	
	Tutor	3		3	3	
	Professor	1		1	0	1
	Assoc. Prof.	2		2	2	<u>+</u>
C	Asstt.Prof.	3		3	3	
Community Medicine	Epidemio-Logist-Cum- Asstt.Prof.	1		1	1	
	Statistician-Cum- Asstt. Prof.	1		1	1	
	Tutor	4		4	7	
	Professor	1		1	5	
	Assoc. Prof.	4		4	2	
General Medicine	Asstt.Prof.	5		5	5	
	Sr. Resident	5		5	5	
	Jr. Resident	10		10	11	
Paediatrics	Professor	1		1	3	

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	Assoc. Prof.	2	2	0 [,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Asstt.Prof.	3	3	3	
	Sr. Resident	3	3	3	
	Jr. Resident	6	6	6	
	Professor	1	1	1	
Tuberculosis &	Assoc. Prof.	0	0	0	
Respiratory	Asstt.Prof.	1	1	1	
Diseases	Sr. Resident	. 1	1	1	
	Jr. Resident	2	2	2	
•	Professor	0	0	1	
Dermatology,	Assoc. Prof.	1	1	0	
Venereology &	Asstt.Prof.	1	1	1	
Leprosy	Sr. Resident	1	1	2	
	Jr. Resident	2	2	2	
	Professor	0	0	1	
	Assoc. Prof.	1	1	1	
Psychiatry	Asstt.Prof.	1	1	1	
	Sr. Resident	1	1	1	
	Jr. Resident	2	2	2	
	Professor	1	1	3	
	Assoc. Prof.	4	4	2	
General Surgery	Asstt.Prof.	5	5	7	
	Sr. Resident	5	5	6	
	Jr. Resident	10	10	10	
	Professor	1	1	1	
Orthopaedics	Assoc. Prof.	2	2	0	2
-	Asstt.Prof.	3	3	3	

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	Sr. Resident	3	3	5	
	Jr. Resident	6	6	6	
	Professor	1	1	2	
Oto-Rhino-	Assoc. Prof.	1	1	0	
Laryngology	Asstt.Prof.	1	1	1	
Laryngology	Sr. Resident	1	1	1	
	Jr. Resident	2	2	2	
	Professor	1	1	1	
	Assoc. Prof.	1	1	1	
Ophthalmology	Asstt.Prof.	1	1	1	
	Sr. Resident	1	1	2	
	Jr. Resident	2	2	2	
	Professor	1	1	3	
01	Assoc. Prof.	2	2	0	
Obstetrics &	Asstt.Prof.	3	3	4	
Gynaecology	Sr. Resident	3	3	4	
_	Jr. Resident	6	6	7	
	Professor	1	1	. 3	
	Assoc. Prof.	3	3	1	
Anaesthesiology	Asstt.Prof.	5	5	5	
	Sr. Resident	3	3	4	
	Jr. Resident	6	6	6	
	Professor	1	1	0	1
D. J. D.	Assoc. Prof.	1	1	1	1
Radio-Diagnosis	Asstt.Prof.	1	1	1	
	Sr. Resident	3	3	3	
Dentistry	Professor	1	1	1	

May 3.19

Dr. Utpal Kumar Datta

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Assoc. Prof.	1	1	1	
Asstt.Prof.	1	1	1	
Tutor/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:

- (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.

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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 campuand run by the same management.	s/city

(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.	Dr. Arunkumar	Assistant Professor	Community Medicine	Reported Late for attendance

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- 1) Deficiency of Teaching Faculty: 3.70% (5 out of 135) 8. Professor- 2 (1 in Community Medicine, 1 in Radiodiagnosis), Associate Professor-3 (1 in Pathology, 2 in Orthopaedics).
 - 2) Deficiency of Resident doctors: 0% (85 out of 85)
 - 3) Deficiencies pointed out during last inspection are rectified.

Dr. Ashok Anand

Signature of Assessors

Dr. Utpal Kumar Datta

(7-2,201)

Signature of Dean/Principal