

**MEDICAL COUNCIL OF INDIA**  
**ASSESSMENT FORM FOR 150 ADMISSIONS REPORT**  
**(INCREASE IN ADMISSION CAPACITY FROM \_\_\_\_\_ TO \_\_\_\_\_)**

Part A-I **(2019-20)**  
 (To be filled by the Institution)

**1.1 Type of Assessment**

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

U/S 10A- Increase Admission Capacity: Regular/Compliance: Letter of Permission (  ), 1<sup>st</sup> renewal (  ), 2<sup>nd</sup> renewal (  ),  
 3<sup>rd</sup> renewal (  ), 4<sup>th</sup> renewal (  )

U/S 11: Recognition: Regular / Compliance

U/S 19 Continuation of Recognition: Regular / Compliance

Any Other: \_\_\_\_\_

**Note:**

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

Date:

Signature with stamp Dean/Principal/Director

*(Handwritten Signature)*  
**Dr. Patnam Mahender Reddy**  
**Institute of Medical Sciences**  
 Chevella-501 503, R.R. Dist. T.S.

**Name of the Institution/ College** : **Dr. Patnam Mahender Reddy Institute of Medical Sciences**  
**Address of College** : **Chevella Village & Mandal, Ranga Reddy Dist. Telangana**  
**Address of Hospital** : **Chevella Village & Mandal, Ranga Reddy Dist. Telangana**  
  
**Telephone No.** : 0841724555  
**E-mail** : pmrims@gmail.com  
**Fax** : 08417 - 204555  
**Website** : www.pmrims.com  
**Management** : Rinish Educational Society  
**Regn. No. of Society/Trust/Company** : 1247  
  
**Consent/Affiliation from University** : **KALOJI NARAYANA RAO UNIVERISTY OF HEALTH SCIENCES**  
**Period of Validity** : 2019-21  
**No. of seats as per Essentiality Certificate:** 150  
**Period of Validity** :

**Last Assessment Date: 07-11-2017**

Date:

Signature with stamp Dean/Principal/Director  
Principal

Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.

## 1.2

(a) Location: The applicant college is located in Chevella (city/village) of Chevella taluka Rangareddy district of Telangana state.

(b) The College has following plots of land:

Plot #	Survey #	Place	Area	Remarks if any
	55/E 55/1/UU 53/E 55 53/AA/5/A 53/A/5/AA 53 53/A/2 53/1/A 53/A/3 53/A/4 53/A/1 53/AA/4E	CHEVELLA	Ac. 20.20 gts	

(c) The campus is **unitary**/~~divided~~ into \_\_\_\_\_ parts. If not unitary distance between parts. \_\_\_\_\_.

1.3 **Building Plan approval from the competent authority:** Gram Panchayat date of approval 09.09.2015

Date:

Signature with stamp Dean/Principal/Director

Principal

Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.

**1.4 Buildings:**

College: 11000 sq.mt.

Hospital (including OPD): 35000 sq.mt.

Hostel & Residential complex: 8000 sq.mt.

**1.5 Building Use/ Occupancy Certificate:** approved by Gram Panchayat dated 19.06.2017.

**1.6 Nearest Commercial airport:** Shamshabad Distance in kms 53 **Traveling time required: 1 hour 10 minutes**

**1.7 Nearest major Railway Station:** Vikarabad Distance in kms 29 **Traveling time required: 40 Minutes**

**1.7 (a) Nearest major city is Hyderabad, distance in km 29 kms, Traveling time required: 40 Minutes**

**1.8 Water Supply:** Through Municipal / Bore wells Municipal

**1.9 Electric supply:** Sanctioned Load 650 KVA.

**1.10 Generators:** available/not available, Available load 500 KVA

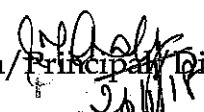
**1.11 Drainage & sewage disposal**

**1.12 Working Hours:**

1. OPD Timings: 8.00 am to 4.00 pm
2. College Timings: 8.00 am to 4.00 pm
3. Library Timings: 9.00 am to 9.00 pm

Date:

Signature with stamp Dean/Principal/Director

  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevela-501 503, R.R. Dist. T.S.

**1.13 Annual Budget: College & Hospital**

Year	Current Financial Year		Previous financial year As per Audited report	
	College	Hospital	College	Hospital
Salary	10 crores			8 crores
- Doctors				
- Resident Doctors				
- Other Staff				
Technical Training				
Library & Education				
Maintenance				

Date:

Signature with stamp Dean/Principal/Director

**Dr. Patnam Mahender Reddy**  
**Institute of Medical Sciences**  
**Chevela-501 503, R.R. Dist. T.S.**

Contingencies	—	—	—	—
Others	—	—	—	—
Total	10 crores			8 crores

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

Department	Technician	Assistant	Attendant	Other
Radiology	MD ABDI ALI SK WAHEED T MADHAN KUMAR	M PRABHAKAR P SITARAM K SHANKAR RAO MOHD SALEEM V GOVIND REDDY	T YADIAH	AMEEN BEGUM
General medicine	G.MAHESH Y RANI B SRINIVAS	B DIWAKAR M MALLESH C ANJANEYULU		

Date:

Signature with stamp Dean/Principal/Director

Dr. Patnam Madhender Reddy  
Institute of Medical Sciences  
CheveMa-501 503, R.R. Dist. T.S.

Pediatrics			G TARUN KUMAR	S PADMAMMA
OT	E NAVEEN KUMAR G NARENDER GOUD K PRABHAKAR CHARY T VINOD KUMAR	K PRASAD YADAV	G CHANDRAIAH	B SANDYA
Anesthesia	PRAVEEN KUMAR D VIJAY KUMAR M KRISHNA T BHASKAR K SHIVA J VIJAY KUMAR K PARAMESHWAR	M NAGESH	M RAMULU	K LAKSHMI
Blood Bank	Y RAMANA	P ARUNA	K RAMESH	K MANJULA
Labour Room				T SARALA
Emergency Room				H NEELAMMA
CSSD	S SOUMYA			
Mortuary			V RAMDEV	B YADAMMA
Laundry			M BALAIAH	H SATYAMMA
Electrical	D KARNAKAR	S SATHAIAH B SHANKAR		

Date:

Signature with stamp Dean/Principal/Director

Dr. Patnam Madhukar Reddy  
 Institute of Medical Sciences  
 Chevella-501 503, R.R. Dist. T.S.

		P VENKATA SWAMY P MAHENDER G RAVINDER		
Housekeeping	B SADASHIVA REDDY P SURENDER REDDY	K SHIVA REDDY	R MAHESH S RAMULU D LAKSHMINARAYANA B NIRANJAN M SURESH	M SWAROOPA M SUGUNAMMA M VINODHA K MANEMMA G ANDALU G DEVAMMA B SUNANDA H AMRUTHA P MANOHARA NAJAMA BEGUM A SUJATHA T CHANDRAKALA
Psychiatry				K SRAVANI
Biomedical Waste Man.			N SUDHAKAR	B MANEMMA
Pharmacy	D MADHAVI V HARISHANKAR CHARY	M SRAVAN KUMAR A AMARENDER GOUD		P VEENA
ENT	K ANITHA	SANTOSH KUMAR	J SHANKAR	D KAVITHA

Date:

Signature with stamp Dean/Principal/Director

Dr. Patnam Mahender Reddy  
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Chevela-501 503, R.R. Dist. T.S.



	SHAMEEM SULTHANA			
Orthopedics	C SRAVAN KUMAR D NAVANEETHA	G KIRAN	T RAVI KUMAR	K JAYALATHA
Ophthalmology	K KRISHNA PRASAD		B SHEKAR	P LAKSHMI
TB & chest	N AVINASH			D CHANTEMMA

General surgery	M NAGESH		K SUDHAKAR	R MARUTHAMMA
Anatomy	A ASHOK		M DHARMA REDDY	K ANJAMMA
Biochemistry	P RAJA KUMARI P SHEKAR		S MADHUSUDHAN	MANEMMA
Physiology	S SUKANYA		P VENKATESH	G CHANDRAMMA
Microbiology	M YADIAH K CHANDRAPAL		M PENTAIAH	R SHANTHI
Pathology	E NAVEEN KUMAR B YADAMMA		G ASHOK	E SHRAVANI
Forensic Medicine	D MAHESH KUMAR		M BHEEMIAH	DEVAMMA
Community Medicine	T RAMESH		R MAHIPAL GOUD	H NEELAVENI
Pharmacology	K PARAMESHWAR GOUD		T CHANDRAIAH	REVATHI

Date:

Signature with stamp Dean/Principal/Director

Dr. Patnam Mahendra Reddy  
 Institute of Medical Sciences  
 Chevella-501 503, R.R. Dist. T.S.

UHC	D RAJESHWAR REDDY			
RHC	K SARITHA			

**1.15 Nursing Staff available:**

Category	No of Beds 300	
	Required Nos.	Available Nos.
Staff Nurses	141	146
Sister Incharge	27	29
ANS	4	4
DNS	2	3
Nursing Suptd	1	1
Total	175	183

**1.16 Medical Education Unit (MEU): (Information not required for LOP inspection)**

Available as per Regulations : Yes/No

Name of the MEU coordinator : Dr. PV Satyanarayana

Details of affiliated faculty : Dr. N Jaya Prakash,  
Dr. B Rama Rao,

Date:

Signature with stamp Dean/Principal/Director

*Dr. Patnam Mahender Reddy*  
**Dr. Patnam Mahender Reddy**  
**Institute of Medical Sciences**  
**Chevela-501 503, R.R. Dist. T.S.**

Dr. N Panduranga Rao,  
Dr. VH Kumara Swamy

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

Name of the MCI Regional Centre where  
Above training has been undertaken : \_\_\_\_\_

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 *Medical Education Technology* at the allocated MCI Regional Centre

Feedback evaluation of workshops and action taken reports on the basis of feedback obtained (comments in the annexure 1)

**1.17 Continuing Medical Education:** (Information not required for LOP inspection)

Details of CMEs/workshop organized by the college held in the past 1 year: \_\_\_\_\_


Details of the credit hours awarded for the past one year (details/comments in annexure)

**1.18 College Council:** (Information not required for LOP inspection)

- Name, designation, contact no. and address of the President & Secretary.
- Composition of the Council (HODs as members & Principal / Dean as chairperson)
- No. of times the College Council meets per year (min 4) : \_\_\_\_\_

Date:

Signature with stamp Dean/Principal/Director

  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevela-501 503, R.R. Dist. T.S.

- Action taken report on College Council Meetings (details / comments in annexure II)

**1.19 PG Course:** If the college is running PG course; Please mention the intake of PG seats subject wise

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)	685
Casualty attendance (24 hrs. data)	33
No of admissions	46
No. of discharges	42

Date:

Signature with stamp Dean/Principal/Director  
 Dr. Patnam Mahender Reddy  
 Institute of Medical Sciences  
 Chevella-501 503, R.R. Dist. T.S.

Item	Daily average (of last 12 months) as provided by institute	
Bed occupancy: No of Beds occupied	227	
No of beds required	300	
Bed occupancy %	75%	
<b><u>Operative Work</u></b>		
No, of major surgical operations	11	
No. of minor surgical operations	15	
No. of normal deliveries	1	
No. of caesarian sections	1	
<b><u>Radiological Investigations -</u></b> No of patients.	<b>O.P.D</b>	<b>I.P.D</b>
X-ray	118	36
Ultrasonography	41	21
Barium, IVP etc.	5	2

Date:

Signature with stamp Dean/Principal/Director  
  
 Dr. Patnam Mahender Reddy  
 Institute of Medical Sciences  
 Chevela-501 503, R.R. Dist. T.S.

Item	Daily average (of last 12 months) as provided by institute	
	O.P.D	I.P.D
C.T. Scan	-	-
<b><u>Laboratory Investigations - No of patients/samples</u></b>	<b>O.P.D</b>	<b>I.P.D</b>
Biochemistry	211	63
Microbiology	30	14
Serology	75	25
Haematology	167	55
Clinical pathology	48	28
Histopathology	-	3
<u>Cytopathology</u>	4	2
<u>Others</u>		
Any other (HIV/AIDS, DOTs, Malaria etc)		

Date:

Signature with stamp Dean/Principal/Director

Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevenna-501 503, R.R. Dist. T.S.

## 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.	NA
6.	Result of all the examinations of last one year.	NA
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.	NA
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)	NA

Date:

Signature with stamp Dean/Principal/Director

Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Cheveña-501 503, R.R. Dist. U.S.

Sr. No.	Details of information	Yes/No
15.	Details of clinical material in the hospital	Yes
16.	unit /dept .wise beds distribution	Yes

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

I hereby given 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:

Signature with stamp Dean/Principal/Director

Dr. Patnam Jayashankar Reddy  
 Institute of Medical Sciences  
 Chevella-501 503, R.R. Dist. T.S.



1

**MEDICAL COUNCIL OF INDIA**  
**ASSESSMENT FORM FOR 2019 - MBBS ADMISSIONS REPORT**  
**FOR LOP**

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

**Part A-II (2019-20)**  
(to be filled by the Assessors)

Dy/11/11/18  
30/11/18

**1.1 Type of Assessment**

U/S 10A-regular/compliance: Letter of Permission (  ), 1<sup>st</sup> renewal (  ), 2<sup>nd</sup> renewal (  ), 3<sup>rd</sup> renewal (  ), 4<sup>th</sup> renewal (  )


U/S 10A- Increase Admission Capacity: Regular/Compliance: Letter of Permission (  ), 1<sup>st</sup> renewal (  ), 2<sup>nd</sup> renewal (  ), 3<sup>rd</sup> renewal (  ), 4<sup>th</sup> renewal (  )


U/S 11- Recognition - Regular/Compliance

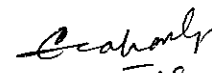
Continuation of Recognition - Regular / Compliance


Any Other: \_\_\_\_\_

Name of the Institution	:	Dr. PATNAM MAHENDER REDDY INSTITUTE OF MEDICAL SCIENCES
Address	:	CHEVELLA VILLAGE & MANDAL, RANGA REDDY DIST, TELANGANA - 501503
Telephone No.	:	08417 24555
E-mail	:	<a href="mailto:pnrims@gmail.com">pnrims@gmail.com</a>

  
Dr. Ramesh Bharti  
Sign. of the Assessor  
27/11/18

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor  
27.11.18

  
Signature of Dean/Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevela-501 503, R.R. Dist. T.S.

College Website :	www.pmrims.com		
Council Letter No. & Date	:	MCI-34(41)2018-Med/E-49/ Dated: 20-11-2018	
Assessment Date:	26 & 27 - November 2018	Last Assessment Date :	7 & 8 - November 2017
PG Courses	:	No	

### Particulars of Assessors

Name of the Assessors	Correspondence Address	Contact No.	Email
Dr. Ramesh Bharti Professor	Dept. of Surgery/General Surgery, Dr. Rajendar Prasad Government Medical College, Tanda - 176001, Himachal Pradesh.	9418466999	<a href="mailto:rameshbharti@rediffmail.com">rameshbharti@rediffmail.com</a>
Dr. Niyati A. Trivedi Professor	Dept. of Pharmacology Medical College, Baroda, Baroda, Gujarat.	09998961097	<a href="mailto:natrivedi@yahoo.com">natrivedi@yahoo.com</a>
Dr. Chhandamayee Mohanty, Professor	Dept. of Anatomy, Institute of Medical Sciences, BHU, Varanasi, Uttar Pradesh	09454732189	<a href="mailto:cmohantyims@yahoo.com">cmohantyims@yahoo.com</a>

Dr. Ramesh Bharti  
Sign. of the Assessor

Dr. Niyati A. Trivedi  
Sign. of the Assessor

Dr. Chhandamayee Mohanty  
Sign. of the Assessor

Dr. Pawan Mohender Reddy  
Principal  
Institute of Medical Sciences  
Chowke-521 603, P.A. Dist. T.S.

## 1.2. The College has following

The campus plot is.	Unitary campus/divided into _____ parts if divided, Please give details.
Building Plan approval from the competent authority.	Name: Gram Panchayath Chevella Date 09-09-2015
Building Use/ Occupancy Certificate from the competent authority.	Name: Gram Panchayath Chevella Date 19-06-2017

## 1.3 Dean/Principal: Dr. S.M. Ahalya, M.D., with 43 years of teaching experience - 23 yrs of professor &amp; 21 yrs of experience of Asst. Prof. She is also holding the post of Professor in the Department of Pathology.

Dean Office is located in Ground floor 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)	Available
Dean/Principal Office	36	Yes
Staff Room	54	Yes
College Council Room	80	Yes

Dr. Ramesh Bharti  
Sign. of the Assessor

Dr. Niyati A. Trivedi  
Sign. of the Assessor

Dr. Chhandamayee Mohanty  
Sign. of the Assessor

Signature of Dean/Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.

## 1.4 Medical Education Unit (MEU):

Available as per Regulations	:	Yes
Name of the MEU coordinator	:	Dr. PV Satyanarayana
Name, Designation & Experience of affiliated faculty	:	
Name of the MCI Regional ( Nodal) Centre where above training has been undertaken	:	Dr. Satyanarayana has undergone Basic Course Workshop in Medical Education Technology in Regional Training Gandhi Medical College, Secunderabad from 30 <sup>th</sup> April to 2 <sup>nd</sup> May, 2013.
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)	:	Nil
Date/s of the above workshops	:	Nil
Details & Duration of Workshops in Medical Education Technology conducted by MEU	:	Nil
Details of faculty who have undergone basic course workshop in <i>Medical Education Technology</i> at the allocated MCI Regional Centre	:	Nil
Details of faculty who have undergone advanced course workshop in <i>Medical Education Technology</i> at the allocated MCI Regional Centre	:	Nil
Feedback evaluation of workshops and action taken reports on the basis of feedback obtained	:	Nil

Dr. Ramesh Bharti  
Sign. of the Assessor

Dr. Niyati A. Trivedi  
Sign. of the Assessor

Dr. Chhandamayee Mohanty  
Sign. of the Assessor

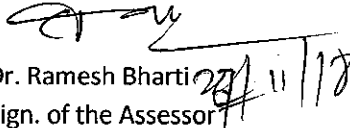
Signature of Dean/Principal  
Dr. Potnam Mahender Reddy  
Head of Medical Sciences  
Chowdary-201-002, B.R. Vengal Rao


## 1.5 Continuing Medical Education :


No and Details of CMEs/workshop organized by the college held in the past 1 year	:	Nil
Details of the credit hours awarded for the past one year	:	Nil


## 1.6 College Council :

Name, designation, contact no. and address of the President & Secretary.	:	Dr. S.M. Ahalya 9849457442 Dr. PV Satyanarayana 9908060712
Composition of the Council (HODs as members & Principal / Dean as chairperson)	:	Dean is the Convenor and all the HODs are members
No. of times the College Council meets per year (min 4)	:	1
Details of college Council meetings where students Welfare was discussed and Action taken report (details / comments in annexure II)	:	NA

  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Signature of Dean/Principal  
**Dr. Patnam Mahender Reddy**  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.

- 1.7 **Pharmacovigilance Committee:** Present  
No. of meeting in the previous yrs. 1 (Minutes to be checked)

1.8 **Examination Hall:**

Requirement	Available
No. - 1/2/3 Area - 250 Sq. mt. Capacity - 250	Not required for LOP

1.9 **Lecture Theatres:**

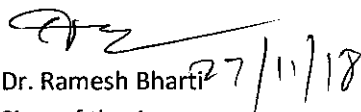
	Medical college		Hospital		Comments
	Req	Available	Req	Available	
Number	2	2	0		Lecture theatre is not required in hospital for LOP
Capacity	180	200			
Type (Gallery)	Yes		Yes / No		
A.V. Aids	Yes		Yes / No		


1.10 **Library**

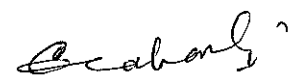
Air-conditioned - Yes


Working Hours: 9.00 Am to 9.00 PM

- a. Stack room: Available  
b. Reading room: Available

  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Signature of Dr. Patnam Mahender Reddy  
Principal

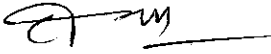
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
CheveHa-501 503, R.R. Dist. T.S.

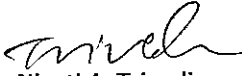
	Required	Available	Remarks
Area	600 Sq.m.	800 Sq.m.	
Student Reading Room (Inside)	75 Capacity	75 Capacity	
Student Reading Room (Outside)	75 Capacity	75 Capacity	
Staff Reading Room	30 Persons	30 Persons	
Room for Resident/PG reading room	10	10	
Particulars	Required Nos.	Available Nos.	Remarks
No. of Books	3000	3133	
Journals (Indian)	14	15	
Journals (Foreign)	6	06	
Internet Nodes	40	40	


### 1.11 Common Room for Boys & Girls


	Area Required Sq. Mt.	Available Area Sq. Mt.	Toilet - Attached Y/N
Boys	150	177.36	Y
Girls	150	177.36	Y

1.12 Central Photography Section: Only space is Available  
 Staff Yes  
 Equipments 1 Camera

  
 Dr. Ramesh Bharti  
 Sign. of the Assessor

  
 Dr. Niyati A. Trivedi  
 Sign. of the Assessor

  
 Dr. Chhandamayee Mohanty  
 Sign. of the Assessor

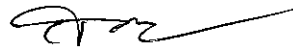
  
 Signature of Dean/Principal  
 Dr. Patnam Mahender Reddy  
 Institute of Medical Sciences  
 Chevella-501 503, R.R. Dist. T.S.

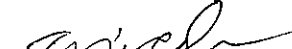
## 1.13 Hostel: Location - Within campus


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	AC Visitor room, AC Study room with internet & Computer, Recreation room with TV, Music, Indoor Games Y/N	Remarks
UG Students @ (60% Capacity)	90	Boys 102 Single Room 30x1=30 Double Room 18x2=36 Triple Room 12x3=36	Yes	Y	Y	Y	Y	
		Girls 30 Single Room 10x1=10 Double Room 4x2=8 Triple Room 4x3=12	Yes	Y	Y	Y	Y	
Interns @ 50% Capacity	-	NA						
Resident @ 100% Capacity including PG	46	51	Y	Y	Y	Y	Y	
Nurses @ 20% Capacity	35	36	Y	Y	Y	Y	Y	


## Residential Quarters:

Category	Required Nos.	Available Nos.	Remarks
Teaching Staff @ 20% Capacity	14	15	
Non-Teaching Staff @ 20% Capacity	20	20	

  
Dr. Ramesh Bharti  
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Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
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Signature of Dean/Principal  
Dr. Patma  
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Chevela-501 503, R.R. Dist. T.S.



**1:14 Recreational Facilities:**

Outdoor games		Yes
Play field/s		Yes
Type of games		
Indoor games facilities		Yes
Gymnasium		Available

**1.15 Gender Harassment Committee** -: Yes (Documents attached in the check list annexures)

**1.16 Anti Ragging Committee:** (Documents attached in the check list annexures)

**1.17 Biometric Devices:** Not installed (will apply for biometric devices after getting the LOP)

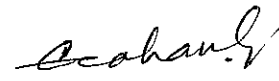
- No of OFAMOS devices installed in the college.
- Whether all OFAMOS devices are working conditions?
- If not the reason thereof, and whether complaints lodge to SI
- Number of faculty punches recorded on the day of assessment.
- Any other relevant information.




Dr. Ramesh Bharti  
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Dr. Niyati A. Trivedi  
Sign. of the Assessor



Dr. Chhandamayee Mohanty  
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Principal

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**TEACHING HOSPITAL**

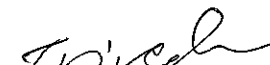
- 2.1 Name of the Hospital: Dr. Patnam Mahender Reddy General Hospital  
Owned by: ~~Government/Trust/Rinesh Educational Society/Company~~
- 2.2 Name of the Medical Superintendent: Dr. S.M. Ahalya, MD (Pathology), with 20 years administrative experience.

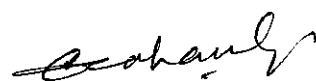
	Space Requirement	Availability
Medical Supdt's Office	36 sq. mt.	Yes
Administrative Office	150 sq. mt	Yes


2.3 **Teaching and other facilities :**

OPD Timings	:	9.00 A.M. to 4.00 P.M.
Separate Registration areas for male/female patients available	:	Yes
Separate Registration counters for OPD/IPD	:	available/not available
Are the Registration counters computerized	:	Yes
Staff for registration center	:	adequate / inadequate (on the basis of OPD attendance)

  
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Dr. Niyati A. Trivedi  
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Dr. Chhandamayee Mohanty  
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Waiting areas for above patients available	:	Yes
No. of rooms for examination of patients available	:	Yes
Capacity of teaching area in each department	:	Yes
Enquiry Desk	:	Yes


#### 2.4 Facilities available in OPD

<b>-Medicine</b> Injection room - Male - Female	Yes Yes	E.C.G. Room	Yes
<b>Surgery</b> Dressing room - - Male - Female	Yes Yes	Minor OT	Yes
<b>Orthopaedics</b> Plaster room Dressing room - - Male - Female	Yes Yes Yes	Plaster cutting room	Yes
<b>Ophthalmology</b>	Refraction Rooms Dark Rooms Dressing Rooms / Minor Procedure Room		Yes Yes
<b>ENT</b>	Audiometry (AC & Sound proof) Speech Therapy		Yes Yes
<b>Pediatrics</b>	Child Welfare Clinic Immunization Clinic		Yes Yes

  
Dr. Ramesh Bharti  
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Dr. Niyati A. Trivedi  
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Dr. Chhandamayee Mohanty  
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	Child Rehabilitation Clinic	Yes
OBS & GYN	Antenatal Clinic	Yes
	Sterility Clinic	Yes
	Family Welfare Clinic	Yes
	Cancer Detection Clinic	Yes

Comments :


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


Teaching Hospitals in Campus with Total Beds 300.

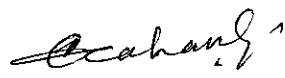
Department	Ward Nos.	Beds Required *	Total Beds Available	Facilities Available in Each Ward						Remarks
				Nursing Station Y/N	Exam/Treat Room Y/N	Pantry Y/N	Store Room Y/N	Duty Room Y/N	Demo Room (25 Capacity) Y/N	
Gen. Medicine	3	72	72	Y	Y	Y	Y	Y	Y	
Pediatrics	2	24	24	Y	Y	Y	Y	Y	Y	
TB & Respiratory Medicine	1	8	8	Y	Y	Y	Y	Y	Y	
Psychiatry	1	8	8	Y	Y	Y	Y	Y	Y	
Dermatology	1	8	8	Y	Y	Y	Y	Y	Y	
Gen. Surgery	3	90	90	Y	Y	Y	Y	Y	Y	
Orthopedics	1	30	30	Y	Y	Y	Y	Y	Y	
Ophthalmology	1	10	10	Y	Y	Y	Y	Y	Y	
ENT	1	10	10	Y	Y	Y	Y	Y	Y	
OB & GYN	1	40	40	Y	Y	Y	Y	Y	Y	
Total		300	300							


Comment :

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


  
Dr. Ramesh Bharti  
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Dr. Niyati A. Trivedi  
Sign. of the Assessor

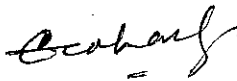
  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor


  
Signature of Dean/Principal  
Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevela-501 503, R.R. Dist. T.S.

Item	On the Day of assessment		Remarks
O.P.D. attendance at 2.00 PM On first day	702		
Casualty attendance (24 hrs. data)	19		
No of admissions	37		
No. of discharges	22		
Bed occupancy% at 10.00AM on first day	62.3% (187 out of 300 Beds)		
<b>Operative Work</b>			
No, of major surgical operations	6		
No. of minor surgical operations	12		
No. of normal deliveries	1		
No. of caesarian sections	1		
<b>Radiological Investigations</b> ( No. of patients )	<b>O.P. D</b>	<b>I.P.D</b>	
X-ray	92	19	
Ultrasonography	36	15	
Barium, IVP etc.	0	0	
C.T. Scan	0	0	

  
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Dr. Chhandamayee Mohanty  
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Signature of Dean/Principal  
Principal  
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Chevella-501 503, R.R. Dist. T.S.

Item	On the Day of assessment		Remarks
	O.P. D	I.P.D	
<b>Laboratory Investigations - No. of Patients/ samples</b>			
Biochemistry	160	41	
Microbiology	22	11	
Serology	38	21	
Hematology	153	45	
Clinical pathology	41	22	
Histopathology	0	2	
Cytopathology	6	2	

**2.7 Medical Record Section:**

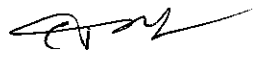
Manual / Computerized

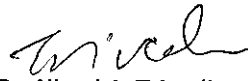
ICD X classification of diseases followed for indexing : yes


**2.8 Central casualty services :**

**No of Beds: Required: 10 Available: 10**

- Number of CMO posted/Shift : 6 in 3 shifts No. of CMO present during Assessment round: 2
- Number of nurses posted / Shift: 9 in three shifts Total No. of CMO: 6
- Separate casualty for OBGY cases: Yes Available, if yes No. of beds 5

  
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Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Signature of Dean, Principal  
**Principal**

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Equipment	Availability Y/N	Number
Central Oxygen & suction facility	Y	10 ports
Pulse oximeter	Y	10
Ambu bag	Y	2
Ultrasonography Machine	Y	1
Crash Cart	Y	1
Emergency Drug Tray	Y	1
Defibrillator	Y	2
Ventilator	Y	1
X-ray Unit - (Mobile) & X-ray Static	Y	1
Minor OT	Y	Yes

Comments:

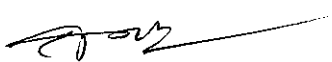
## 2.9 Clinical Laboratories

Central Clinical Laboratory: Under control of department of : Microbiology

Separate sections for pathology, microbiology, hematology & biochemistry: available.

## 2.10 Operation theatres

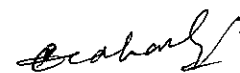
Type	Requirement	Available	Remarks
Major	4	5	
Minor	2	2	



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2.11 Equipment available in O. T. Block (Specify numbers) List attached as per check list annexures.

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	1	Y	Y	Y	Y	Y	y	
ENT	1	Y	Y	Y	Y	Y	Y	
Ophthal	1	Y	Y	Y	Y	Y	Y	
Ortho	1	Y	Y	Y	Y	Y	Y	
OBS & GYN	1	Y	Y	Y	Y	Y	Y	
Emergency	1	Y	Y	Y	Y	Y	Y	
Septic	1	Y	Y	Y	Y	Y	Y	

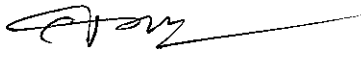
No. of Pre-operative Beds available: 4


No. of Post Operative Beds available 10

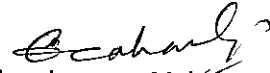
Comment:


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	5	2	Y	Y	Y	
ICU	5	5	2	Y	Y	Y	
SICU	5	5	-	Y	Y	Y	
NICU/PICU	5	0	3	Y	Y	Y	

  
Dr. Ramesh Bharti  
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Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Signature of Designated Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
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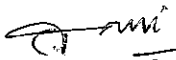


## 2.13 Labor Room


Rooms	Beds	Remarks
Clean Cases	2	
Septic Cases	1	
Eclampsia	1	

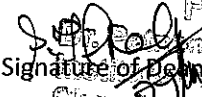
## 2.14 Radiological Facilities:

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	1	0			
100 mA	1	2	Y	Y	
Static X Ray					
300 mA	1	0	Y	Y	
600mA	1	2	Y	Y	
800/1000 mA		0			
CT Spiral Minimum 16 slice	0	0	-		

  
27/11/18  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
27.11.18  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Principal  
Signature of Principal  
Chevela-501 503, R.R. Dist. T.S.

Equipment	Required no.	Available no.	PNDT Approval Y/N	Functional Status at the time of assessment Y/N	Remarks if any
USG	2	2	Y	Y	

**2.15 Blood Bank:**

Available and functional: Yes

Number of units dispensed in a day 3 per day

Number of units stored on day of assessment 6

License valid up to: 26-04-2022(LICENCE NUMBER AND COPY TO BE APPENDED AS ANNEXURE-VII)

Blood Separation Facility - Available/Not available

**2.16 Pharmacy:** Pharmacist/Staff available: 4. List is attached as per the check lists annexures.

- No. of sub-stores located in different parts of hospital: 2
- 

**2.17 Central sterilization Department : functional**

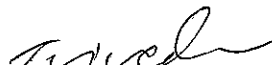
- Timings 24 & Shifts: 2
- Equipment: Horizontal autoclaves 6 / Vertical autoclaves 1, ETO Sterilizers: 1
- Separate receiving and distribution points - Yes
- 

**2.18 Intercom:** Available: Yes

No. of incoming lines 1 EBP No. of extension lines: 69



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Dr. Chhandamayee Mohanty  
Sign. of the Assessor



Signature of Dean/Principal  
Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-504 503, R.R. Dist. T.S.

**2.19 Central laundry/Alternative Arrangements:**

~~In-House~~/Outsourced {if outsourced, then MOU copy to be annexed}:

Type of Laundry: Mechanized / Manual

**2.20 Kitchen/ Alternative Arrangements**

- ~~In-House/Outsourced~~ {if outsourced, then MOU copy to be annexed} :
- Food free of charge: yes (for the indoor patients)      Number of patients 187 on the day of inspection
- Provision of special diet: yes
- Services of a nutritionist/dietician: available

**2.21 (a) Total no. of Canteens: 1.**      There is 1 canteen for Staff and Patient Attenders apart from Hospital Kitchen)

(b) Total no. of Mess in campus : 1 (there is a provision for Mess for 1 Boys and 1 for Girls hostel)

**2.22 Arrangements for Biomedical Waste Management.**

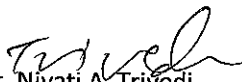
- Outsourced/~~in-house~~: (if outsourced, append MOU) Annexure attached as per the check list annexures
- 

**2.23 Central Research Lab: Not available (not required for LOP)**

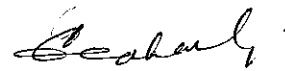
- Available - Yes/No
- Facilities - Adequate/Not Adequate
- Research Projects:
  - Completed Nos \_\_\_\_\_
  - Ongoing Nos \_\_\_\_\_



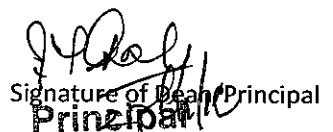
Dr. Ramesh Bharti  
Sign. of the Assessor



Dr. Niyati A. TriVedi  
Sign. of the Assessor



Dr. Chhandamayee Mohanty  
Sign. of the Assessor




Signature of Dean/Principal  
Principal

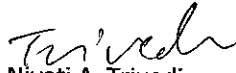
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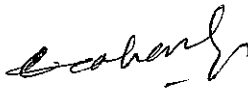
## 2.24 Nursing and Paramedical staff :

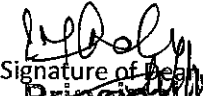
Nursing staff:	No of Beds _____	
Category	Required Nos.	Available Nos.
Staff Nurses	141	146
Sister Incharge	27	29
ANS	4	4
DNS	2	3
Nursing Suptd	1	1
Total	175	183

Paramedical And Non teaching staff	Required Nos.	Available Nos.
	100	163

  
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Dr. Niyati A. Trivedi  
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Dr. Chhandamayee Mohanty  
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Signature of the Principal  
Principal  
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Institute of Medical Sciences  
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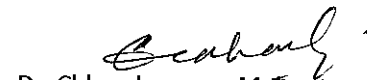
## MEDICAL COLLEGE


### 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	No
5.	List of students admitted merit-wise category-wise (UG & PG) for the current and previous year.	NA
6.	Result of all the examinations of last one year.	NA
7.	Details of members of the Anti Ragging Committee with contact details including landline Phone, mobile, email etc...	NA
8.	Details of members of the Gender Harassment Committee with contact details including landline Ph. mobile, email etc...	NA
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)	NA
11.	Any research publication during the last one year.	No
12.	Details of any CME programmes, conferences and/or any academic activities conducted by the institution.	No
13.	Details of any awards and achievements received by the students or faculty.	No
14.	Detailed status of recognition of all the courses(with the scan copies of permission letter)	NA
15.	Details of clinical material in the hospital	Yes
16.	unit /dept .wise beds distribution	Yes

  
Dr. Ramesh Bharti  
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Dr. Niyati A. Trivedi  
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Dr. Chhandamayee Mohanty  
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Signature of Dean/Principal  
**Principal**  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.

3.1 (a) College timings 9.00 AM To 4.00 (Not yet started)


3.2 Teaching Programme:


Didactic teaching	Yes/no
Demonstration	Yes/no
Integrated teaching (Horizontal/Vertical teaching)	Yes/no
Clinical posting	Yes/no
Clinical Pathological Conference	Yes/no
Grand Rounds	Yes/no
Statistical Meeting	Yes/no
Seminars	Yes/no

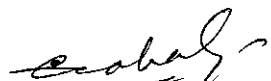
Teaching Facilities:


3.3 Anatomy

Required	Available	Required	Available
Demonstration Room/s • No 2 • Capacity - 75 to 100 students	2 Each of capacity 75 students (69.28 sq.mts)	AV Aids:	Yes  90
• Histology practical laboratory (200 sq.mts) • Number of Lab seats	1 (201.sqmts)  90	Museum: 35 seating capacity • Mounted specimens	40 250 145

  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor


  
Signature of Dean/Principal  
**Principal**  
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Institute of Medical Sciences  
Cheveha-501 503, R.R. Dist. T.S.

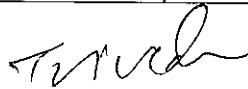
Required	Available	Required	Available
• Number of microscopes _____	90	• Models - Wet & Dry	30
• Dissection Microscopes _____	05	• Bone Sets - Articulated-__	30
• Dissection Hall	375 Sq.mts	& Disarticulated- ____	50
		• MRI & CT	4
Number of dissection tables -	20 + 5	Number of cadavers - ____	1
Cold store / cooling chambers -Capacity of 15 to 18 Bodies	8	Storage tank - ____	1 + 2
Embalming room - 1 of 12 sq.Mts	Available	Band saw	1
Lockers - 150	180	Departmental Library- (80-100 Books.)	Yes

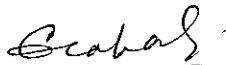
Adequate exhaust, light, water supply and drainage facilities - Available

### 3.4 Physiology

Required	Available	Required	Available
Demonstration Room/s • No - 1 • Capacity - 75 - 90	1 and Another one sharing with Biochemistry	AV Aids:	Available
Mammalian laboratory	1	Haematology laboratory	1
Amphibian Laboratory	1	Clinical Physiology Lab.	1
Departmental Library - 80-100 Books	90		

  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Signature of Dean/Principal  
**Principal**

**Dr. Patnam Mahender Reddy**  
Institute of Medical Sciences  
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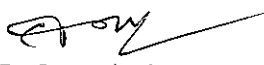
## 3.5 Biochemistry


Required	Available	Required	Available
Demonstration Room/s • No 1 • Capacity - 75 - 100	1 and another 1 is sharing with physiology 75 capacity	AV Aids:	Yes
Number of practical laboratory/ies 1	1	Library / Seminar rooms - 80-100 Books	Yes
Number of Lab seats - 90	90		

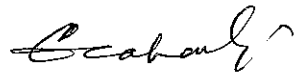
Comment:


## 3.6 Pathology (Accommodation is provided for Faculty, Dept. Library Available)

Required	Available	Required	Available
Demonstration Room/s • No - _____ • Capacity - _____	Nil	AV Aids:	Nil
Practical labs - • Morbid Anatomy/Histopath./ Cytology - _____ Microscopes _____ • Clinical Pathology/Hematology - _____ Microscopes _____	Nil	Museum: _____ Seating Capacity- _____ students Specimens: • Mounted • Unmounted • Catalogues	Nil
Departmental library - 80-100 Books	Nil		
Service Lab - Histopathology/Cytopathology/Hematology/Any specialized work	Yes		

  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Signature of Dean/Principal  
**Principal**  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.



3.7 Microbiology: (Accommodation is provided for Faculty, Dept. Library Available) 7 Service Labs available in the Hospital

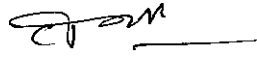
Required	Available	Required	Available
Demonstration Room/s • No - _____ • Capacity - _____ students	Nil	AV Aids:	Nil
practical laboratory__ Number of Lab seats - _____ Number of microscopes/laboratory - _____	Nil	Media preparation facility Autoclaving, Washing and drawing room	Nil
Number of service laboratories - <u>7</u>		Museum: Specimen, Charts, Models & Catalogue seating capacity- _____	Nil
Departmental library - 80-100 Books,	Nil		

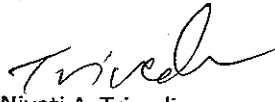
Comment:


3.8 Pharmacology : (Accommodation is provided for Faculty, Dept. Library Available)

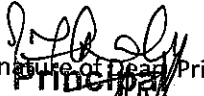
Required	Available	Required	Available
Demonstration Room/s • No - _____ • Capacity - _____ students	Nil	AV Aids:	Nil
Experimental Pharmacology	Nil	Museum: _____ seating capacity • Specimens • Charts • Models • History of Medicine • Catalogues	Nil
Clinical pharmacology/pharmacy	Nil		
Departmental Library - 80-100 Books	Yes		
Computer Assisted Learning Lab	Nil	Mannequins	Nil

Comment :

  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Sign. of the Principal  
Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.

3.9 Forensic Medicine: (Accommodation is provided for Faculty, Dept. Library Available)

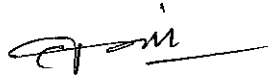
Required	Available	Required	Available
Demonstration Room/s • No - _____ • Capacity - _____ students	Nil	AV Aids:	Nil
Forensic Medicine Practical Lab	Nil	Museum : • Medico-Legal Specimens _____ • Charts _____ • Prototype fire arms _____ • Slides _____ • Poisons _____ • Photographs _____ Catalogues _____	
Autopsy Block. Location - In/Near hospital in a separate structure.	Nil		
Cold storage - Capacity of _____ Bodies	Nil		
Departmental library - 80-100 Books	yes		


Comment:

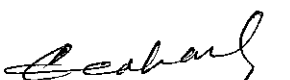
3.10 Community Medicine: (Accommodation is provided for Faculty, Dept. Library Available)


Required	Available	Required	Available
Demonstration Room/s • No - _____ • Capacity - _____ students	Nil	AV Aids:	Nil
Museum: • Charts • Models • Specimens • Catalogues	Nil	Practical lab - 1	Nil
Departmental Library - 80-100 Books	Nil		

Comment:

  
Dr. Ramesh Bharti  
Sign. of the Assessor

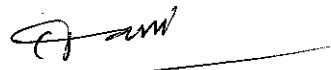
  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Signature of Dean/Principal  
**Principal**  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.

## 3.11 Health Centers (Department of Community Medicine) not needed for LOP

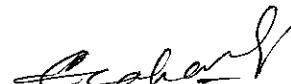
Population covered by the RHTC	NA
It is affiliated to College Yes/No	NA
No. of Students _____ Visit per batch throughout the year No. of Interns _____ Posted per batch throughout the year	NA
Separate blocks for accommodating boys in _____ rooms having _____ beds. Girls _____ rooms having _____ beds.(For Interns)	NA
Facilities for cooking & dining - Yes/No	NA
Daily OPD	NA
Specialist visits if any	NA
Cold chain equipment available	NA
Survey/MCH/Immunization/FP registers	NA
Activities under the National Health Programmes	NA



Dr. Ramesh Bharti  
Sign. of the Assessor



Dr. Niyati A. Trivedi  
Sign. of the Assessor



Dr. Chhandamayee Mohanty  
Sign. of the Assessor




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Institute of Medical Sciences  
Cheveffa-501 503, R.R. Dist. T.S.


## 3.12 Details of U.H.T.C.: not needed for LOP

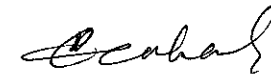
Population covered by the UHC	NA
It is affiliated to College Yes/No	NA
Daily OPD	NA
Diagnostics camps	NA
Survey/MCH/Immunization/FP registers	NA
Specialist visits if any	NA
No. of Students and interns posted in batches of	NA
Deficiency if any	NA

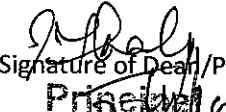
3.13 CONDUCT OF III MBBS EXAMINATION *(only for recognition under 11(2))*

- University which conducts Examination:
- No. of Candidates appeared in Examination:
- The III MBBS examination (Part-II) was conducted satisfactorily: **yes/no**
- Centre for written/practical examination: \_\_\_\_\_
- Was the standard sufficient for MBBS Examination as required by Regulations of the Medical Council of India? \_\_\_\_\_

  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Molfanty  
Sign. of the Assessor

  
Signature of Dean/Principal  
Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevelfa-501 503, R.R. Dist. T.S.

3.14

Medical College-Staff Strength:

Name of College: Dr. Patnam Mahender Reddy Institute of Medical Sciences

Number of students

PG Courses (Yes/No):

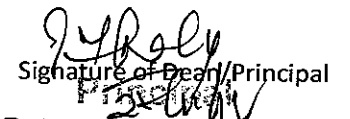
If yes, specify

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_

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

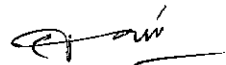
11. \_\_\_\_\_ 12. \_\_\_\_\_ 13. \_\_\_\_\_ 14. \_\_\_\_\_ 15. \_\_\_\_\_

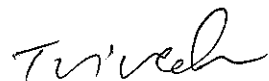
16. \_\_\_\_\_ 17. \_\_\_\_\_ 18. \_\_\_\_\_ 19. \_\_\_\_\_ 20. \_\_\_\_\_


Dr. Ramesh Bharti  
Sign. of the AssessorDr. Niyati A. Trivedi  
Sign. of the AssessorDr. Chhandamayee Mohanty  
Sign. of the Assessor  
Signature of Dean/PrincipalDr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.


## Calculation Sheet (Date:26-11-2018)

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	1	
	Assoc. Prof.	1		1	1	
	Asstt. Prof.	2		2	3	
	Tutor	3		3	3	
Physiology	Professor	1		1	2	
	Assoc. Prof.	1		1	0	
	Asstt. Prof.	2		2	2	
	Tutor	3		3	4	
Biochemistry	Professor	1		1	1	
	Assoc. Prof.	1		1	1	
	Asstt. Prof.	2		2	2	
	Tutor	4		4	4	
Pharmacology	Professor	0		0	0	
	Assoc. Prof.	1		1	1	
	Asstt. Prof.	0		0	0	
	Tutor	1		1	2	
Pathology	Professor	0		0	1	
	Assoc. Prof.	1		1	0	
	Asstt. Prof.	1		1	1	
	Tutor	1		1	1	
Microbiology	Professor	0		0	1	
	Assoc. Prof.	1		1	0	
	Asstt. Prof.	0		0	1	
	Tutor	1		1	1	

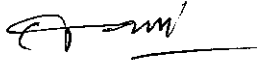
  
Dr. Ramesh Bharti  
Sign. of the Assessor


  
Dr. Niyati A. Trivedi  
Sign. of the Assessor


  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

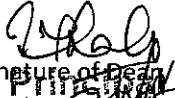
  
Signature of Dean/Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevela-501 503, R.R. Dist. T.S.

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


  
Dr. Ramesh Bharti  
Sign. of the Assessor

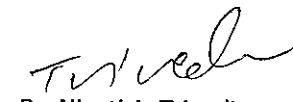
  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

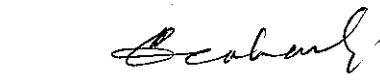
  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor


  
Signature of Dean/Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Cheveha-501 503, R.R. Dist. T.S.

Department	Designation	Requirement as per MSR (UG)	Additional faculty required for running PG courses (if any)	Total (UG + PG)	Accepted	Deficiency
	Sr. Resident	1		1	1	
	Jr. Resident	1		1	1	
Psychiatry	Professor	0		0	0	
	Assoc. Prof.	0		0	0	
	Asstt.Prof.	1		1	1	
	Sr. Resident	1		1	1	
	Jr. Resident	1		1	1	
General Surgery	Professor	1		1	1	
	Assoc. Prof.	2		2	3	
	Asstt.Prof.	3		3	2	
	Sr. Resident	3		3	4	
	Jr. Resident	6		6	6	
Orthopaedics	Professor	0		0	1	
	Assoc. Prof.	1		1	1	
	Asstt.Prof.	1		1	1	
	Sr. Resident	1		1	1	
	Jr. Resident	2		2	2	
Oto-Rhino-Laryngology	Professor	0		0	0	
	Assoc. Prof.	0		0	0	
	Asstt.Prof.	1		1	1	
	Sr. Resident	1		1	1	
	Jr. Resident	1		1	1	
Ophthalmology	Professor	0		0	0	
	Assoc. Prof.	0		0	0	
	Asstt.Prof.	1		1	2	
	Sr. Resident	1		1	1	
	Jr. Resident	1		1	1	

  
Dr. Ramesh Bharti  
Sign. of the Assessor


  
Dr. Niyati A. Trivedi  
Sign. of the Assessor


  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor


  
Signature of Dean/Principal  
Dr. Patnam Manender Reddy  
Institute of Medical Sciences  
Cheveffa-501 503, R.R. Dist. T.S.

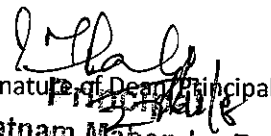


Department	Designation	Requirement as per MSR (UG)	Additional faculty required for running PG courses (if any)	Total (UG + PG)	Accepted	Deficiency
Obstetrics & Gynaecology	Professor	1		1	1	
	Assoc. Prof.	1		1	1	
	Asstt.Prof.	2		2	2	
	Sr. Resident	2		2	2	
	Jr. Resident	4		4	4	
Anaesthesiology	Professor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

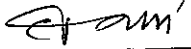
  
Dr. Ramesh Bharti  
Sign. of the Assessor

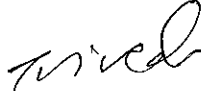
  
Dr. Niyati A. Trivedi  
Sign. of the Assessor


  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor


  
Signature of Dean/Principal  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevela-501 503, R.R. Dist. T.S.

<b>Notes:</b>
<b>For purpose of working out the deficiency:</b>
(1) The deficiency of teaching faculty and Resident Doctors shall be counted separately.
<b>(A) For Teaching Faculty:</b>
(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>(B) For Resident Doctors:</b>
(a) Excess of SR can be compensated to the deficiency of JR of the same department only.
(b) Excess SR/JR of any department cannot compensate the deficiency of SR/JR in any other department.
(c) Any excess of JR cannot compensate the deficiency of SR in same or any other department.
(d) Any excess/ extra teaching faculty of same or any other department cannot compensate the deficiency of SR/JR. e.g. excess of Assistant Professor cannot compensate the deficiency of SR or JR.
(2) A separate department of Dentistry/Dental faculty is not required where a dental college is available in same campus/city and run by the same management.
(3) Colleges running PG program require additional staff, beds & other requirements as per the PG Regulations - 2000.

  
 Dr. Ramesh Bharti  
 Sign. of the Assessor

  
 Dr. Niyati A. Trivedi  
 Sign. of the Assessor

  
 Dr. Chhandamayee Mohanty  
 Sign. of the Assessor

  
 Signature of Dean/Principal  
 Dr. Patnam Balender Reddy  
 Institute of Medical Sciences  
 Chittoor, A.P. Dist. T.S.

**3.15 Details of Faculty/Residents not counted/accepted.**

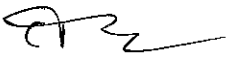
(Only faculty/residents who signed attendance sheet before 11:00 am on the first day of assessment should be verified. (In case of Junior Residents/Senior Residents on night duty, 12:00 noon.) No verification of Declaration forms should be done for the faculty/residents coming after 11:00 am of the first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


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


**3.16 1) Deficiency of Teaching Faculty: 0 out 65 i.e. Nil**


**2) Deficiency of Resident doctors: NIL**

**3.17 Status of discharge notice/notices issued in respect of irregular admissions (UG/PG) if any. NO**

  
Dr. Ramesh Bharti  
Sign. of the Assessor

  
Dr. Niyati A. Trivedi  
Sign. of the Assessor

  
Dr. Chhandamayee Mohanty  
Sign. of the Assessor

  
Signature of Dean/Principal  
**Principal**  
Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.

## Summary of Assessment

1. Dr. PATNAM MAHENDER REDDY INSTITUTE OF MEDICAL SCIENCES (College Name),  
is run By RINISH EDUCATIONAL SOCIETY
2. The college has got Permission from GOI/MCI with intake of 150 seats for the last academic year.
3. Type of assessment: For LOP No. of seats: 150
4. PG courses : No
5. Deficiency of teaching staff if any:  
Shortage of teaching faculty is Nil
6. Deficiency of resident doctors if any:  
Shortage of resident doctors is Nil
7. Deficiency of the infrastructure of college and hospital If any: Pl. mention category wise;
8. Deficiency of clinical material If any: Pl mention category wise;
9. Any other Remarks

Dr. Ramesh Bharti  
Sign. of the Assessor

27/11/18

Dr. Niyati A. Trivedi  
Sign. of the Assessor

Dr. Chhandamayee Mohanty  
Sign. of the Assessor

27-11-18

Signature of Dean/Principal

Dr. Patnam Mahender Reddy  
Institute of Medical Sciences  
Chevella-501 503, R.R. Dist. T.S.