



# महाराष्ट्र आरोग्य विज्ञान विद्यापीठ

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES

महसुळ - दीडोरी रोड, नाशिक - ४२२ ००४, Mhasrul-Dindori road, NASHIK - 422 004

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MUHS

## Local Inquiry Committee Report Faculty of Medicine

(For Grant of First Time Affiliation for starting and increase in intake - UG Colleges)

(The inspector should Fill all the Entries in his own hand writing (Typed LIC report will not be accepted))

Date of Inspection	:	D	D	/	M	M	/	Y	Y	Y	Y			
Name & Designation of Inspectors :													Signature	
1)													Chairman	
2)													Member	
3)													Member	
1	Name of the College / Institution	:	Govt. Medical College, Ambernath											
a	Address with PIN		B.G. Chaya Hospital, Near Ambernath Municipal Council, 421501											
b	Email Address		deangmcambernath@gmail.com											
c	Telephone No.(s)		9323959000											
d	Fax No(s).													
e	Year of Establishment		2024											
f	Status		Government / Corporation / Private											
g	First time affiliation for (Click whichever is applicable, and fill relevant details)		Starting of medical college. Intake Capacity: 100 / 150											
h	Letter of Permission by NMC		Increase in intake capacity from ___ seats to ___ seats.											
i	Government of Maharashtra GR		Letter No. 22011/31 Dated 3/10/24 Intake: 160											
j	Government of Maharashtra GR		Letter No. MED-2022/229 Dated 22/10/24 Intake: 100											
2	Name of Society / Trust / Company / Local body / Govt.		Government of Maharashtra											
a	Registration Number and Date *		Not Applicable											
b	Address with PIN													
c	Email Address													
d	Telephone No.(s)													
e	Fax No(s).													
f	Website													
g	Whether Medical Education is one of the objectives of the trust													
h	Copy of the audited statements of last three financial years available?													
i	Bank balance certificate available?													
j	The budgetary provision for next five years is available?													

\* Not applicable for Government / Corporation / Local body

Signature of LIC members: 1. Dr. Rajesh Kumar 2. Dr. Vilas Takate 3. Dr. P. S. Dastur

Chairman Member

a	Name of the Dean/ Principal:	Dr. Santosh Varma
a	Years of experience	Assistant Professor , Associate Professor , Professor
b	Mobile No.	9323559000
c	Office Landline	-
c	E-mail	drangmcambernath@gmail.com

#### A. Land Information:

##### 1. Campus:

- a) Land available: 8.00 Hectoy -Acres
- b) Whether single pieces of land? Yes Yes / No,
- If not: No of pieces of land: \_\_\_\_\_ Distance between them: \_\_\_\_\_

#### Land details (Add ROW, if necessary)

Srno	Name of Village / City	Survey No	Area in Hectors	Area in acres (=Hectors x 2.5)	7/12 extract showing applicant trust / society etc as legal owner?	NA available with purpose mentioned as medical college?	Remarks
1	Ambernath	16/5	8.00	20	Yes	Yes	-

##### 2. Constructed area:

- a. College: In process sq mtr
- b. Hospital: \_\_\_\_\_ sq mtr
- c. Hostels: \_\_\_\_\_ sq mtr
- d. Quarters: \_\_\_\_\_ sq mtr
- e. Any Other buildings: \_\_\_\_\_ sq mtr

(LIC to verify following land documents. Wherever applicable, LIC must cross-check these documents using online facility)

SrNo	Document	Available	Verified	Remarks of inspectors
1	7/12 extract of ALL land showing applicant trust / society / Company etc as legal owner	Yes		
2	8A / Property card	Yes		
3	"NA" of ALL land (Verify the purpose for "NA")	Yes		
4	Building plan	In process		
5	Requisite Government permission for construction of all buildings (Including hospital, college, hostels, quarters etc) (Private architect certificate should not be considered)	In process		
6	Requisite Government permission for construction of college building	In process		
7	Building completion certificate from Government authorities, applicable for all buildings including hospital, college, hostels, quarters etc) (Private architect certificate should not be	In process		

Signature of LIC members: 1. [Signature] 2. [Signature] 3. [Signature]



	considered)			
8	Unitary piece of land certificate			
9	Any other relevant applicable document (such as City X /City Y status, in case of land is not in unitary piece, hilly area etc)			

## B. Hospital Information:

### 1. General information

- a) Name of the hospital: Dr. B.G. Chaya Hospital, central hospital  
b) Date of establishment: \_\_\_\_\_  
c) Date since 300 beds of hospital are registered: \_\_\_\_\_ (Please attach the document)

(LIC to verify following land documents. Wherever applicable, LIC must cross-check documents using online facility)

Sr No	Document	Available	Verified	Remarks of inspectors
1	Hospital registration showing requisite number of beds since two years before date of application	yes		
2	Maharashtra Pollution Control Board Certificate	yes		
3	Fire Audit / clearance from Government department	yes		
4	PCPNDT certificates for applicable machines / instruments	yes		
5	AERB approvals for all applicable machines	yes		
6	Environmental clearance (if hospital constructed area is > 20000 sq mtr)	yes		
7	Any other relevant document	-		

### 2. OPD

Sr	Item	Details	Remarks of inspectors
1	OPD Timings	8:00 AM to 1:00 PM	
2	Separate Registration areas for male/female, OPD /IPD	yes	
3	Are the Registration counters computerized	yes	
4	No. of registration counters	04	

### 3. Department wise facilities available in OPD

Sr	Item	Details	Remarks of inspectors
1	<b>General Medicine</b>		
	Number of OPD examination rooms	08	
	Separate injection rooms for male and female	yes	
	ECG rooms	yes	
	Specialty Clinics (Provide list with their days)	yes	
2	<b>General Surgery</b>		
	Number of OPD examination rooms	07	
	Separate dressing rooms for male and female	yes	

Signature of LIC members: 1. \_\_\_\_\_

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	Minor OT	yes	
	Specialty Clinics (Provide list with their days)		
3	<b>Orthopedics</b>		
	Number of OPD examination rooms	04	
	Separate dressing rooms for male and female	yes	
	Minor OT	yes	
	Plaster room	yes	
	Plaster cutting room	yes	
	Specialty Clinics (Provide list with their days)	—	
4	<b>Ophthalmology</b>		
	Number of OPD examination rooms	04	
	Separate dressing rooms for male and female	yes	
	Minor OT	yes	
	Refraction Room	yes	
	Specialty Clinics (Provide list with their days)		
5	<b>ENT (Otorhinolaryngology)</b>		
	Number of OPD examination rooms	04	
	Audiometry	yes	
	Minor OT	yes	
	Specialty Clinics (Provide list with their days)	—	
6	<b>Obstetrics and Gynecology</b>		
	Number of OPD examination rooms	04	
	Minor OT	yes	
	Separate USG room with functional USG machine	yes	
	Specialty Clinics (Provide list with their days)	—	
7	<b>Pediatrics</b>		
	Number of OPD examination rooms	04	
	Specialty Clinics (Provide list with their days)	—	
8	<b>Respiratory Medicine</b>		
	Number of OPD examination rooms	03	
	Specialty Clinics (Provide list with their days)	—	
9	<b>Psychiatry</b>		
	Number of OPD examination rooms	02	
	Specialty Clinics (Provide list with their days)	—	
10	<b>DVL (Skin)</b>		
	Number of OPD examination rooms	02	
	Specialty Clinics(Provide list with their days)	—	

Signature of LIC members: 1



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#### 4. Radio diagnosis

Sr	Item	Required	Available	Deficiency
1	X-ray machines available with their details	04	06	00
2	No of USG machines *	01	01	00
3	CT <sup>#</sup>	01	01	00
4	MRI with details <sup>\$</sup>	00	00	
5	Mammography	00	00	00
6	Any other facility			

\* USG Machines in OT, Ob Gy OPD, Casualty, Cardiology department etc. should not be counted.

# Minimum 16 slice CT machine is to be considered.

\$ Minimum 1.5 T MRI is to be considered.

(Outsourced machines /facility should not be counted.)

#### 5. Casualty

Sr	Item	Required	Available	Deficiency
1	No of Beds	10	10	
2	Separate Casualty OBGY beds	05	05	
3	Central Oxygen & suction facility	Availage	Available	00
4	Monitors	10	10	
5	Ambu bag	09		
6	Ultrasonography Machine	01	01	
7	Crash Cart	01	01	
8	Emergency Drug Tray	05	05	
9	Defibrillator	04	04	
10	Ventilator	10	10	00
11	X-ray Unit – (Mobile) & X-ray Static	02	02	00
12	Minor OT	01	01	00

#### 6. Central Clinical Laboratory

Sr	Item	Required	Available	Deficiency
1	Total area available	As per Norm	Yes	} Nil
2	Hematology	-11-	Yes	
3	Histopathology	-11-	Yes	
4	Cytopathology	-11-	Yes	
5	Clinical Pathology	-11-	Yes	
6	Serology	-11-	Yes	
7	Bacteriology	-11-	Yes	

Signature of LIC members: 1.  2.  3. 

Sr	Item	Required	Available	Deficiency
8	Virology	AS per Norm	yes	} nil
9	Parasitology	-11-	yes	
10	Biochemistry	-11-	yes	
11	Any other			

### 7. Operation theatres

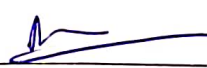


Dept	No of OTs	Central Oxy / Nitrous Oxide Y/N	Anesthesia Machine Y/N	Multipara Monitor with Capnograph Y/N	Defibrillators Y/N	Infusion Pumps Y/N	Remarks
Gen Surgery	02	y	y	y	y	y	} nil
ENT	01	y	y	y	y	y	
Ophthal.	02	y	y	y	y	y	
Ortho	02	y	y	y	y	y	
Obst. & Gyne.	04	y	y	y	y	y	
Emergency	01	y	y	y	y	y	
Septic	01	y	y	y	y	y	
Any other	-	-	-	-	-	-	
Total no of OTs	13						

### 8. Intensive Care Units

Type	Beds (Required)	Beds (Available)	Remarks if any (specially with respect to occupancy and equipments available)
ICCU	20	18	
ICU	20	17	
SICU	10	10	
NICU	10	10	
PICU	10	10	
Any other			

### 9. Labour room complex

Sr	Rooms	Details	Remarks
a	No of labour rooms available for clean cases	02	} nil
b	Separate labour room for Septic Cases	02	
c	Eclampsia room	01	
d	Average Number of daily deliveries including LSCS (Verify with local authorities registration, and checking of past Indoor case papers for all deliveries in any random day etc)	16	

Signature of LIC members: 1.  2.  3. 

**10. Blood Bank:** (Licensed Blood Bank, in the name of trust / hospital and functional in hospital campus is to be considered)

- A) License valid up to \_\_\_\_\_. (Please attach a copy of license)  
 b) Blood Separation Facility – Available/Not available  
 c) Average No of units dispensed per day: 28  
 d) No of units available on the day of assessment: 11

**11. CSSD**

Sr	Item	Details	Remarks
a	No of vertical and Horizontal autoclaves	02	} ni
b	ETO	01	
c	Any other instrument	—	
d	Separate septic an aseptic area	yes	
e	Separate receiving and distributing points	yes	

**12. Indoor Patient Department**

Sr	Department	Beds Required (Including UG and PG)	Total Beds Available	Nursing Station Y/N	Exam/Treat Room Y/N	Store Room Y/N	Duty Room Y/N	Demo Room (25 Capacity) Y/N	Remarks
a	Gen. Medicine	100	100	Y	Y	Y	Y	Y	
b	Pediatrics	50	50	Y	Y	Y	Y	Y	
c	Respiratory Medicine	10	10	Y	Y	Y	Y	Y	
d	Psychiatry	10	10	Y	Y	Y	Y	Y	
e	Dermatology	10	10	Y	Y	Y	Y	Y	
f	Gen. Surgery	100	100	Y	Y	Y	Y	Y	
g	Orthopedics	40	40	Y	Y	Y	Y	Y	
h	Ophthalmology	20	20	Y	Y	Y	Y	Y	
i	ENT	20	20	Y	Y	Y	Y	Y	
j	OB & GYN	50	50	Y	Y	Y	Y	Y	
k	Emergency Medicine	20	20	Y	Y	Y	Y	Y	
l	Super-specialty	—	—	Y	Y	Y	Y	Y	
	Total	430	430						

Signature of LIC members: 1. [Signature] 2. [Signature] 3. [Signature]



### 13. Clinical Material

(For verifying indoor occupancy, one random date within last three months is to be selected, and ALL indoor case papers of new admissions on that date should be verified in MRD)

Item	Average Daily (last year)		On the day of assessment (upto 2 PM)		Remarks
O.P.D. attendance	8247		451		
Casualty attendance	4741		08		
No of new admissions	27201		112		
No. of discharges	20708		79		
Bed occupancy%	95%		95%		
Operative Work					
No. of major surgical operations	97463		78		
No. of minor surgical operations	111047		79		
No. of normal deliveries	78132		47		
No. of caesarian sections	72402		23		
Radiodiagnosis Investigations (No. of patients)	O.P.D	I.P.D	O.P.D	I.P.D	
X-ray	7842	10311	78	44	
Special investigations	10124	10721	721	841	
Ultrasonography	11819	9897	101	78	
C.T. Scan	4742	5131	32	19	
MRI	—	—	—	—	
Mammography	—	—	—	—	
Laboratory Investigations – No. of Patients	O.P.D	I.P.D	O.P.D	I.P.D	
Hematology	19741	10841	721	661	
Histopathology	10831	8479	812	841	
Cytopathology	9831	4541	99	78	
Clinical Pathology	10919	8991	740	741	
Serology	18872	12741	889	741	
Bacteriology	20123	9401	781	780	
Virology	8746	6741	541	619	
Parasitology	5441	3412	91	86	
Biochemistry	22141	18441	1012	901	
Any other	—	—	—	—	


Signature of LIC members: 1



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#### 14. Other infrastructural facility in hospital

Sr. No.	Particulars	Details	Remarks
1	Pharmacy	Available	} NIL
2	Central Workshop	Available	
3	Central Incineration Plant / Hospital Waste Management	Available	
4	Canteen / kitchen	Available	
5	Kitchen	Available	
6	Intercom Network	Available	
7	Computerized MRD ICD X indexing	Available	
8	Central laundry	Available	
9	Central Research Lab	Available	

#### c. College information

##### 1. Administrative area

Sr	Item	Details of availability	Remark
1	Dean office	Available	} NIL
2	College Council	Available	
3	Academic section	Available	
4	Examination section	Available	
5	Accounts	Available	
6	Any other		

##### 2. Central library

Sr. No.	Particulars	Required	Existing	Deficient
1	Area	Available	Available	} NIL
2	Air-conditioned	Yes	Yes	
3	Reading rooms for students (No of rooms with seating capacity in each)	3600 ft	Yes	
4	Staff reading room	Yes	Yes	
5	Space for stocking and display of books and journals	Yes	Yes	
6	Rooms for librarian and other Staff;	Yes	Yes	
7	Journal room	Yes	Yes	
8	No of computers with Internet facility	Yes	Yes	
9	Total No. of books:	3528	Yes	

Signature of LIC members: 1

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10	Number of Journals : (Titles only) (Multiple volumes / issues of one title should be counted as ONE)	30	30	NCL
11	No. of books added in last year:	—	—	—
12	Number of Journals titles added in last year:	—	—	—
13	Is at least one journal title for each broad speciality is available?	yes	yes	yes

Only journals that are indexed in the following databases i.e. Medline, Pubmed Central, Science Citation index, Science Citation Index Expanded, Embase, Scopus, Directory of Open access journals (DoAJ) will be considered.

- Annual subscription for all these journal titles are available and verified by inspectors: Yes / No

### 3. Lecture theatres

Number of lecture theatres required at this stage: College building: \_\_, Hospital building: \_\_

Sr. No.	Details of lecture theaters	Area Required (minimum 1.40 sq mtr per student for 120% of intake capacity)	Area Available	AV Aids	Gallery type (Yes/No)	Whether enabled for e-learning	Whether digitally linked with all teaching areas
1	Lecture theatre -1	yes	yes	yes	yes	yes	yes
2	Lecture theatre -2	yes	yes	yes	yes	yes	yes
3	Lecture theatre -3	yes	yes	yes	yes	yes	yes
4	Lecture theatre -4	yes	yes	yes	yes	yes	yes
5	Hospital building lecture theatre (if applicable)	—	—	—	—	—	—

### 4. Teaching rooms (Small Group)

Sr. No.	Item	Number required	Available	Deficiency
1	Capacity of 50 students	04	04	Nil
2	Capacity of 25 students	03	03	Nil

Signature of LIC members: 1. [Signature] 2. [Signature] 3. [Signature]



### 5. Student Practical Laboratory

(Some of the following labs may not be required, if inspection is for starting of new college. Please put "NA" in front of non-applicable laboratories.)

Sr. No.	Laboratory	Area (at least 3.5 sq. mtr/per student for capacity of 60 students)	Additional rooms for technical staff, stores, equipment storage, etc.	Audio-visual aids	Internet facility digitally linked to all other teaching areas
1	Histology	yes	yes	} Available	} Available
2	Clinical Physiology	yes	yes		
3	Biochemistry	yes	yes		
4	Histopathology & cytopathology	yes	yes		
5	Clinical pathology & Hematology	yes	yes		
6	Microbiology	yes	yes		
7	Clinical Pharmacology	yes	yes		
8	Computer Assisted Learning (CAL) in Pharmacology.	yes	yes		

### 6. Museum (Please put "NA" in case of non-applicability.)

Sr. No.	Department	Area (at least 1.2 sq. mtr/per student for capacity of 50 students)	Audio-visual aids	Internet facility digitally linked to all other teaching areas
1	Anatomy	yes	} Available	} Available
2	Shared by pathology and Forensic Medicine	yes		
3	Shared by Pharmacology, Microbiology and Community Medicine	yes		
4	Any other departmental museum	—		

Signature of LIC members: 1. \_\_\_\_\_

2. \_\_\_\_\_

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## 7. Skills Laboratory

### a) Rooms /Space

Sr	Item	Number Required	Number Available	Deficiency
1	Number of rooms available for examination of patients or standardized/ simulated patients	4 to 8	In process	
2	a room for demonstration of skills to small groups	1		
3	area for review or debriefing area	1		
4	rooms for faculty coordinator and support staff	1 each		
5	adequate space for storage of mannequins and/or other equipment	--		
6	stations for practicing skills			

b) Facility for video recording and review of interaction (feedback): **yes**

c) Teaching areas have internet facility with enabled for e-learning: **yes**

d) AV Aids: **yes**

e) List of mannequins **In process**

Sr No	Mannequin useful for	Available (Yes / No)
1	First aid, Bandaging, splinting Basic Life Support (BLS)	
2	CPR (Cardio Pulmonary Resuscitation)	
3	Various types of injections- Subcutaneous, Intramuscular, Intra-venous	
4	Urine Catheter insertion	
5	Skin & Fascia suturing	
6	Breast examination	
7	Gynecological examination including IUCD	
8	Obstetrics mannequins including Obstetric examination, conduct and management of vaginal delivery.	
9	Neonatal & Pediatric resuscitation	
10	Whole body mannequins	
11	Trauma management	

Signature of LIC members: 1.  2.  3. 





8. Department wise facilities (Please put "NA" in case of non-applicability.)

Sr	Department wise Items	Required no with its details	Available	Deficiency
1	Anatomy			
	Dissection hall (with Dissection tables, Embalming room, Storage tanks, Cold storage room, Ante room) No of cadavers available	4.20 sq mtrs per students for 50% of intake = <u>yes</u> _____ sq mtrs	<u>yes</u>	<u>NIL</u>
	Accommodation for staff Professor Associate Professor Assistant Professor Tutors Non teaching staff Department office	<u>Available</u>	<u>yes</u>	<u>nil</u>
2	Physiology			
	Accommodation for staff Professor Associate Professor Assistant Professor Tutors / JR Non teaching staff Department office	<u>Available</u>	<u>yes</u>	<u>nil</u>
3	Biochemistry			
	Accommodation for staff Professor Associate Professor Assistant Professor Tutors / JR Non teaching staff Department office	<u>Available</u>	<u>yes</u>	<u>nil</u>
4	Pathology			
	Service laboratory each for histopathology, cytopathology, Hematology and other specialized work of the hospital	<u>Available</u>	<u>yes</u>	<u>nil</u>
	Accommodation for staff Professor Associate Professor Assistant Professor Tutors / JR Non teaching staff Department office	<u>Available</u>	<u>yes</u>	<u>nil</u>
5	Microbiology			
	Service laboratory each for (a) Bacteriology including anaerobic bacteria; (b) Serology; (c) Virology; (d) Parasitology; (e) Mycology; (f)	<u>Available</u>	<u>yes</u>	<u>nil</u>

Signature of LIC members: 1.  2.  3. 

	Tuberculosis; and (g) Immunology.	yes	yes	
	media preparation and storage	yes	yes	
	BSL-2 virology lab (as per e-gazette No. MCI-34(41)/2020-Med./103234 notified on 3.6.2020)	yes	yes	NIL
	Accommodation for staff Professor Associate Professor Assistant Professor Tutors / JR Non teaching staff Department office	Available	yes	
6	Pharmacology			
	Animal holding area			
	Accommodation for staff Professor Associate Professor Assistant Professor Tutors / JR Non teaching staff Department office	yes	yes	
7	FMT			
	Postmortem/Autopsy Block (approx.400 sq. M. area)with facilities for cold storage for cadavers, ante- rooms, washing facilities, with an accommodation capacity of 20-25 students, waiting hall, office etc. )	yes	yes	NIL
	MoU with Government/ district hospital, if PM examination not permitted	yes	yes	
	Accommodation for staff Professor Associate Professor Assistant Professor Tutors / JR Non teaching staff Department office	yes	yes	NIL
8	Community Medicine			
a	Accommodation for staff Professor Associate Professor Assistant Professor Tutors / JR Non teaching staff Department office	yes	yes	
b	RHTC Name	RH Badlapur		

Signature of LIC members: 1.  2.  3. 