

SANTOSH

Deemed to be University



4.2.2 Describe the adequacy of both outpatients and inpatients in the teaching hospital during the last five years vis-a-vis the number of students trained and programmes offered

Description of adequacy of outpatient and inpatient statistics as per the norms of the Regulatory Bodies

S. No	Particular	Page No.
1.	Report submitted to National Medical Commission (NMC) for outpatient and inpatient	1-3
2.	Report submitted to Dental Council of India (DCI) for outpatient	4-7



NATIONAL MEDICAL COMMISSION

ASSESSMENT FORM FOR ANNUAL INTAKE OF **150** ADMISSIONS

(INCREASE IN INTAKE FROM 100 TO 150 MBBS SEATS)

(For AY 2021-22)

Part A-II

(to be filled by the Assessors)

All relevant sections of IMC Act,1956 read with sec 61(2) of NMC Act 2019

1.1 Type of Assessment

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

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

U/S 11- Recognition - Regular/Compliance

Continuation of Recognition -Regular / Compliance

Any Other: _____


Ghanshyam
09/10/21

[Signature]
09.10.21

Signatures of the Assessors

Date *8, 9th Oct 2021*
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Signatures of Dean/Principal

[Signature]


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

Item	On the Day of assessment		Remarks
O.P.D. attendance at 2.00 PM On first day	1123		
Casualty attendance (24 hrs. data)	42		
No of admissions	121		
No. of discharges	35		
Bed occupancy% at 10.00AM on first day	81%		
<u>Operative Work</u>			
No, of major surgical operations	26		
No. of minor surgical operations	42		
No. of normal deliveries	8		
No. of caesarian sections	4		
<u>Radiological Investigations</u> (No. of patients)	O.P. D	I.P.D	
X-ray	142	82	
Ultrasonography	102	41	
, Contrast X-rays.	2	1	
C.T. Scan	18	10	

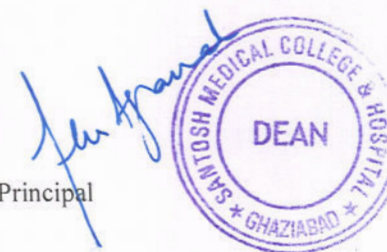
Assessor
09/10/2021

Signatures of the Assessors

[Signature]
Date 09/10/2021

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Signatures of Dean/Principal



Item	On the Day of assessment		Remarks
	O.P. D	I.P.D	
Laboratory Investigations - No. of Patients/ samples			
Biochemistry	305	285	
Microbiology	42	51	
Serology	45	41	
Hematology	56	38	
Clinical pathology	45	24	
Histopathology	17	11	
Cytopathology	6	6	

Signature
09/10/2021

Signatures of the Assessors

Signature

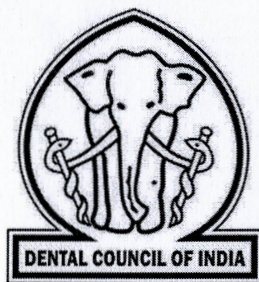
Date

09/10/2021

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Signatures of Dean/Principal





INSPECTION PROFORMA - 2018 BDS PERIODIC

AS PER DCI REGULATIONS 2006 & REVISED BDS COURSE REGULATIONS 2007

(All Points and parameters are to be verified and established in person by the designated Inspectors. All necessary documents to be verified by the Principal/Dean for submission along with the report)

No. of Seats applied for: **100**

DCI Ref/ Letter No: **DE—3(82)-(Inspection)-2019/C-0570 dated 25.11.2019**

Date of Inspection : 26 & 27th November 2019

Name and Address of Inspectors

- 1. Dr. S.C. Bhoyar**
Principal
Chhatrapati Shahu Maharaj Shikshan
Sanstha's Dental College
Paithan Road, Kanchawadi
Aurangabad - 431003 [Maharashtra]
Email ID; dr.sebhoyar@gmail.com
dean@csmssdental.com
- 2. Dr. Manohar Bhat**
Professor & HOD
Jaipur Dental College & Hospital
Dhand, Tehsil - Amer,
Jaipur - Delhi National Highway No.8
Jaipur - 303101 [Rajasthan]
Email ID: kmanoharbhat@yahoo.co.in

Note:-

- I: **This Proforma to be duly typed, filled, printed and NOT hand written.**
- o Each page should be duly signed by the Principal/Dean.
 - o Proforma should be submitted to the Inspectors on their arrival.
 - o Inspector should verify all the contents of the proforma and submit the same alongwith their observation in **PEN** to the council within 48 hours of Inspection.
 - o All documents should be submitted to the DCI in English or translated in English and certified by the competent authority.
- II: No annexure, except consolidated list of teaching staff in the Dental Council of India prescribed format, will be attached alongwith the Inspection Proforma.

V. CLINICAL MATERIAL (No. of Patients) to be checked at the end of the OPD and filled by the Inspectors:

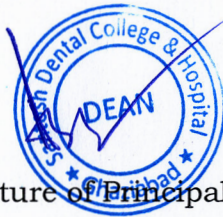
a. **ATTACHED HOSPITAL** : During Inspection: **Annexure Attached**
Attendances
Average (Last 6 months): Annexure Attached

b. **DENTAL COLLEGE** : During Inspection: **Annexure Attached**
HOSPITAL Attendances
Average (Last 6 months): Annexure Attached

(Attendance Register to be checked & signed at the beginning and end of OPD).

*Minimum requirement of new patient's is 50 patients per day for the 1st year in the Dental OPD

*Minimum requirement of new patient's for attach hospital is as per MCI Regulations.



Signature of Principal/Dean with seal

BDS PERIODIC 100 seats

Dental Hospital

DCI INSPECTION HELD ON 18TH & 19TH NOVEMBER 2020

Month	May - 20	June - 20	July - 20	Aug - 20	Sep - 20	Oct - 20
No. of Patients	1440	1920	2640	3120	3480	3720

Average Number of Patients in Last Six Months **2720**

Medical Hospital

DCI INSPECTION HELD ON 18TH & 19TH NOVEMBER 2020

Month	May - 20	June - 20	July - 20	Aug - 20	Sep - 20	Oct - 20
No. of Patients	13	184	345	121	217	97

Average Number of Patients in Last Six Months **163**



**Office of the Medical Superintendent
Santosh Hospital**

(Associate Teaching Hospital, Santosh Medical College, Ghaziabad)

Ref. No. SMC11/2020/17

Date: - 19.11.2020

Following is the details of Corona and quarantine patients admitted in Santosh Medical College Hospital, Ghaziabad.

Quarantine and Corona Patient Details				
Sl. No.	Month	Date	No.	Type
1	March	29 th – 31 st	24	Quarantine
2	April	1 st – 29 th	160	Quarantine
3	May	26 th – 31 st	13	Corona
4	June	1 st – 30 th	184	Corona
5	July	1 st – 31 st	345	Corona
6	August	1 st – 31 st	121	Corona
7	September	1 st – 30 th	217	Corona
8	October	1 st – 31 st	97	Corona
	Total		1161	



Dr. Alpana Agrawal
Medical Superintendent
Santosh Medical College Hospital
Ghaziabad

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