

Maharashtra University of Health Sciences, Nashik

Inspection Committee Report for Post Graduate Institute
(Institutes running exclusive PG Course) for Academic Year 2025 – 2026
Faculty of Medicine

(For Grant of Continuation / Extension of Affiliation for affiliated PG Colleges/Institutes/Fellowship/Certificate Course/Ph.D. Colleges & Hospitals)

Date of Establishment of College : 1../1/1956.....

Date of Inspection :

Name & Designation of Inspectors :		Signature
1)	Chairman	
2)	Member	

1	Name of the College / Institute	: GOVERNMENT MEDICAL COLLEGE, CHHATRAPATI SAMBHAJINAGAR
a	Name of Society / Trust	: NA
b	Address	: PANCHAKKI ROAD, NEAR JUBILEE PARK, GHATI, CHHATRAPATI SAMBHAJI NAGAR Pincode431001
c	Email Address	: deangmca@gmail.com
d	Fax No.(s)	: 02402402412
e	Telephone No.(s)	: 0240-2402412
f	Website	: http://www.gmcaurangabad.com
g	College Code	: 1401
h	Status	: Government / Corporation / Private
i	Stage of Renewal	: Recognition
j	Details of the Dean/Principal	:
2	Name of the Dean/ Principal	: Dr. Shivaji Sukre
a	Nature of Appointment	: Permanent
b	Mobile No.	: 9960563399
c	Office Landline	: 0240-2402412
d	E-mail Address	: deangmca@gmail.com

Deangmca

Deputy Dean
Postgraduate (Academic)
Govt. Medical College,
Chhatrapati Sambhajnagar

Deangmca
DEAN
Govt. Medical College
Chhatrapati Sambhajnagar

1. PG Intake Capacity:

Sr. No.	Course	Subject	No. of Recognized Seats	No. of Permitted Seats	Total Intake Capacity
1.	MD	Anatomy	3	-----	3
2.	MD	Physiology	3	-----	3
3.	MD	Biochemistry	2	-----	2
4.	MD	Pharmacology	3	-----	3
5.	MD	Pathology	14	-----	14
6.	MD	Microbiology	13	-----	13
7.	MD	Forensic Medicine	3	-----	3
8.	MD	Community Medicine	12	-----	12
9.	MD	Gen. Medicine	20	-----	20
10.	MD	Pediatrics	9	-----	9
11.	MD	Skin & VD	3	-----	3
12.	MD	Psychiatry	3	-----	3
13.	MS	Gen. Surgery	20	-----	20
14.	MS	Orthopedics	9	-----	9
15.	MS	Otorhinolaryngology	4	-----	4
16.	MS	Ophthalmology	8	-----	8
17.	MS	Obst. & Gynae.	21	-----	21
18.	MD	Anaesthesia	25	-----	25
19.	MD	Radio-diagnosis	13	-----	13
20.	MD	Chest and TB	0	5	5
21.	MD	Geriatric Medicine	03	2	05
22.	MD	Radio - Therapy	02	-----	02
23.	DM	DM neonatology	4	-----	4
24.	DM	DM Paediatrics Oncology	4	-----	4
25.	Mch	Mch Surgical Oncology	3	-----	3
26.	Mch	Mch Gynecological Oncology	0	4	4
27.	DM	DM Medical Oncology	0	4	4
28.	Mch	Mch Head-Neck Surgery	0	2	2

1. Details of the College are available on the College Website, in the prescribed format (Part II)? Yes /No
2. Whether the information is complete in all respect. Yes /No

J. B. Kulkarni
 Deputy Dean
 Postgraduate (Academic)
 Govt. Medical College,
 Chhatrapati Sambhajinagar

[Signature]
 DEAN
 Govt. Medical College,
 Chhatrapati Sambhajinagar

3. If incomplete information, please write the points from prescribed format (part II) regarding unavailable/insufficient information, (LIC to physically verify) the infrastructure/available facilities regarding those points and write the observation below-

Sr. No.	Subject	Points Number in prescribed format	Particulars of the point	Observations of the LIC

4. LIC to randomly choose the 10 points of concern, which will help improve the quality of medical education and student's life on the campus.

Sr. No.	Subject	Points Number in prescribed format	Particulars of the point	Observations of the LIC

5. LIC to visit all departments and physically verify the availability of teaching staff and residents in the department (Please attach the Biometric attendance of all departments over previous 06 months.) Annexure- "I".

6. Curricular Activities in the College-

- a. Whether the PG activities are conducted regularly? Yes/No
 (LIC to verify the record of PG activities and submit the report in below format)

Sr. No.	Subject	PG Activity	Frequency of conduction as per the available records	Remark
Department wise List Attached				

Bhaise

Deputy Dean
 Postgraduate (Academic)
 Govt. Medical College,
 Chhatrapati Sambhaji Nagar

[Signature]

DEAN
 Govt. Medical College
 Chhatrapati Sambhaji Nagar

7. **Ongoing Research Activities in the college excluding PG thesis** (LIC to verify the relevant details of any one of ongoing research activities such as Ethics Committee Approval, status of data collection, data analysis etc., and give the remarks below).

Project Details (A.Y. 2023-24)			
Student Name	Hospital Guide	College Guide	Project Title
Department wise List Attached			

8. **MUHS Faculty Evaluation Status:**

(Refer University Circular No.99/2022 (MUHS/Acad/EO/UG & PG/3869/2022 dtd.21/10/2022))

Faculty Evaluation carried out at College level	Total No. of Teachers	Total evaluation carried out	Remaining pending with reasons
Yes	196	196	0

9. **Status of NAAC Accreditation:** Yes / No / Not Applicable

If Yes, Grade & Date of last Inspection:

If No, what is current status/ progress of work

11. **Status of Online Boarding:** _____

12. **Services for Person with Disability:** - Lifts are made available in every building.
Slope ramps are available in every building.
Commode washrooms are available

13. **Availability of Freeship/ Scholarship for category Students:** Available

B. Chaurse

Deputy Dean
Postgraduates (Academic)
Govt. Medical College,
Chhatrapati Sambhajinagar

[Signature]

DEAN
Govt. Medical College,
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14. Students Feedback

Sr. No.	Particulars to be verified	Details on College Website	Adequate/ Inadequate
1	Hostel facility: Boys (UG)	Yes	Adequate
2	Boys (PG)	Yes	Adequate
3	Girls (UG)	Yes	Adequate
4	Girls (PG)	Yes	Adequate
5	Interns	Yes	Adequate
6	Residents	Yes	Adequate
7	Canteen Facility [Note: Verify Canteen Facility is monitored as per MUHS Circular No.18/2019 dated 19/03/2019].	Yes	Adequate
8	Warden/ Rector	Yes	Adequate
Sr. No.	Particulars to be verified		
9	Hygiene	Yes	Adequate
10	Vending Machine	Yes	Adequate
11	Toilets / Washroom Facilities (Cleanness & Hygiene maintain)	Yes	Adequate
12	Housekeeping at Hostel	Yes	Adequate
13	Drinking Water Facilities	Yes	Adequate
14	Security Services	Yes	Adequate

15. Fees Details:

Not applicable as per GR- MED-1023/SR. NO. 321/EDU 2 Dated 10/08/2023

Sr. No.	Continuation / Extension of Affiliation Fees Details:				
	Course (s)	Paid / Not paid	Amount	Outstanding (if any)	Reasons of Non-payment
1					
2	Not applicable as per GR- MED-1023/SR. NO. 321/EDU 2 Dated 10/08/2023				
3					

16. Any Other Fees Details:

Not applicable as per GR- MED-1023/SR. NO. 321/EDU 2 Dated 10/08/2023

Sr. No.	Course (s)	Paid / Not paid	Amount	Outstanding (if any)	Reasons of Non-payment
1					
2	Not applicable as per GR- MED-1023/SR. NO. 321/EDU 2 Dated 10/08/2023				
3					
4					

B. B. B. B.

Faculty Dean
(Academic)
Govt. Medical College,
Chhatrapati Sambhaji Nagar

[Signature]
DEAN
Govt. Medical College,
Chhatrapati Sambhaji Nagar

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
Information to be provided by the College for verification of Local Inquiry Committee

LIST OF ANNEXURE FOR LIC

No. of Annexures	Particulars	Verified by Committee
ANNEXURE- I	<p>LIC to physically verify the availability of teaching staff and residents in the assigned department/departments (Please attach the attendance sheet duly signed by teachers and residents)</p> <p>1. Hard copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website</p>	Yes/No
ANNEXURE- II	<p>Intake Capacity/ Seat Matrix</p> <p>1. Hard copy & soft copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website.</p>	Yes/No
ANNEXURE- III	<p>Total Subject-wise Teacher Staff List (Approved + Not approved)</p> <p>1. Hard copy & soft copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website.</p>	Yes/No
ANNEXURE- IV	<p>Examination Related Information</p> <p>Hard copy & soft copy of this Annexure must be submitted to the University). The information must be made available on the College website.</p>	Yes/No
ANNEXURE- V	<p>Form for Fellowship/Certificate Course(s)</p> <p>Hard copy & soft copy of this Annexure must be submitted to the University). The information must be made available on the College/Training Centre website.</p>	Yes/No
ANNEXURE- VI	<p>Form for Ph.D Courses</p> <p>Hard copy & soft copy of this Annexure must be submitted to the University). The information must be made available on the College/Training Centre website.</p>	Yes/No
ANNEXURE- VII	<p>Declaration by the Dean / Principal of the College / Institute</p> <p>Original copy of this Annexure must be submitted to the University.</p>	Yes/No

B. Chaurse

Deputy Dean
Postgraduate (Academics)
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IMPORTANT INSTRUCTIONS & DECLARATIONS:

1. Our College is fully aware that our college is responsible to fulfil and maintain norms including the infrastructure both physical and human resources, teaching faculty and clinical material throughout Academic Year as per MSR/Council norms/University norms. In case false/wrong declaration or fabricated documents is submitted for purpose of Affiliation of the University by the College and if it is found by the University at any stage, then our college is fully aware that affiliation will be withdrawn by the University with immediate effect with penal action.
2. It is certified that our college has uploaded all above Annexures on our college website and it will be kept ready for verification of Local Inquiry Committee (LIC). Our college is fully aware that University will not grant Continuation of Affiliation, in case if required information, is not uploaded on college website.
3. Our College hereby undertake that all Annexures information will be made available on college website for a period of next 05 years. Year-wise information of all Annexures will be made available on college website for a period of 05 years from time to time. In case if any information (Annexurewise) is called-for by the University in intermittent period, our college will furnish required information to the University immediately.

Date :

Signature of Dean/Principal

Place :

Name of the Signatory
DEAN
Govt. Medical College,
Chhatrapati Sambhaji Nagar
(with Seal of the College / Institute)

J. B. Maize

Deputy Dean
(Academic)
Govt. Medical College,
Chhatrapati Sambhaji Nagar

DECLARATION BY LIC

We hereby certify that, the College has uploaded Annexures as prescribed by University on College Website and it is duly verified by our Committee. Details of Information of Annexure/s which is not uploaded on College Website is mentioned in LIC Report.

Name of Inspectors		Signature of Inspectors
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	

Date:

Short Report

To,
The Registrar
M.U.H.S., Nashik

Sub: - Short Report of Local Inquiry Committee for Continuation of Affiliation for the Academic Year 2022-23.

Sir,

With reference to above mentioned subject and letter we are visiting

.....
College/Institute on dated and sending a **Short Report** regarding present Teaching Staff and IPD in your prescribed format as follows at 11.00 a.m.

1. Number of Teaching Staff present:
2. Number of IPD patients on Bed:

(Photocopy of Attendance of Teacher and IPD at the time 11:00 a.m.)

1)
(Name & Sign of LIC Member)

2)
(Name & Sign of LIC Member)

3)
(Name & Sign of LIC Member)

4)
(Name & Sign of LIC Chairman)