

# BABA FARID UNIVERSITY OF HEALTH SCIENCES, FARIDKOT



## Inspection Proforma for PG courses: Subject: Anatomy (Summary)

Note:

1. Please read the proforma carefully before completing
2. Information provided should be brief and to the point. No unnecessary information be given.
3. Do not use annexures unnecessarily. All efforts be made to provide information within the proforma. Use annexures only when information is very lengthy.
4. Inspector to give his final remarks after the summary in the proforma. No separate confidential letters be sent.
5. The college will be responsible for filling all column and signing at appropriate places.

Date of Inspection:-

Name of Inspector with qualifications

PG Degree

1	<b>Name of the institution</b> (Private/Government)	Director/Dean/Principal			
		Name			
		Date of Birth			
		Teaching Experience			
		PG Degree (Recognised/Non-R)			
		Year			
	Subject				
2	<b>Department Inspected</b>	Head of Department			
		Date of Birth			
		Teaching Experience			
		PG Degree (Recognised/Non-R)			
		Year			
	Subject				
3	(a) <b>Number of UG seats</b>	Recognised (Year_____)	Permitted (Year___)	First LOP date	
	<b>(b) Date of last inspection for</b>	<b>UG</b>	<b>PG</b>		
		Purpose	Purpose		
		Result	Result		
4	<b>Total PG Teachers available in the Department</b>				
	Designation	Number	Names & qualifications	PG Degree (Recognised/Non-R)	Total teaching Experience
	Professors				
	Assoc. Professors/Readers				
	Asstt. Professors				

Note: Count only those teachers who are physically present

Signature of Inspector

5. Investigative work load on the day of inspection (**Entire hospital**)

Radiology		Biochemistry	Pathology		Microbiology	Blood units consumed
MRI			Histopathology			
CT			FNAC			
USG			Cytology			
Mammography			Haematology			
IVP/ Barium etc			Others			
Plain X-Rays						
DSA						
Any other						

## 6. Publications from the department during last 3 years:

(Give only full articles published in indexed journals)

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7	<b>Blood Bank</b>	License valid	Yes / NO
		Blood component facility available	Yes / NO
		Number of blood units stored on the inspection day	
		Average units consumed daily (entire hospital)	

## 8. Specialized equipment available in the department:

Adequate / Inadequate

## 9. Space (Labs., D. Hall, Offices, Teaching areas)

Adequate / Inadequate

10	Library		Central	Departmental
		Number of Books		
		Number of Journals		
		Latest journals available upto		

## 11. Casualty                      Number of Beds \_\_\_\_\_ Available equipment \_\_\_\_ Adequate / Inadequate

## 12. Common Facilities

- Central supply of Oxygen / Suction:                      Available / Not available
- Central Sterilization Department                      Adequate / Not adequate
- Laundry:                      Manual/Mechanical/Outsourced:
- Kitchen                      Gas / Fire
- Incinerator:                      Functional / Non functional    Capacity:                      Outsourced
- Bio-waste disposal                      Outsourced / any other method
- Generator facility                      Available / Not available
- Medical Record Section:                      Computerized / Non computerized
- ICD10 classification                      Used / Not used

## 13. Accommodation for staff

Available / Not available

14	Hostel Accommodation	UG		PG		Interns	
		Boys	Girls	Boys	Girls	Boys	Girls
	Number of Rooms						

Signature of Inspector

<b>15</b>	<b>Total number of PG seats in the concerned subject</b>		Recognized seats	Date of recognition	Permitted	Date of permission
		Degree				
		Diploma				

**16.** Year wise PG students admitted (in the department inspected) during the last 5 years and available PG teachers

Year	No. of PG students admitted		No. of PG Teachers available in the dept. (Give names)
	Degree	Diploma	

<b>17</b>	Other PG courses run by the institution	Course Name	No. of seats	Department
		DNB		
		M.Sc.		
		Others		

**18.** Stipend paid to the PG students, year-wise:

Year	Stipend paid in Govt. colleges by State Govt.	Stipend paid by the Institution
Ist Year		
IInd Year		
IIIrd Year		
IVth Year		

**19.** List of Faculty joining and leaving after last inspection:

DESIGNATIONS	NUMBER	NAMES	
		JOINING FACULTY	LEAVING FACULTY
Professor			
Associate Prof.			
Assistant Prof.			
SR/Tutor/Demons.			
Others			

**20.** Faculty deficiency, if any

Designation	Faculty available (number only)	Faculty required	Deficiency, if any
Professor			
Assoc Professor			
Asstt. Professor			
Sr. Residents			
Jr. Residents			
Tutor/ Demonstrator			
Any Other			

**Signature of Inspector**

**21. Final remarks by the Inspector.**

(No recommendations regarding permission / recognition be made. Give only factual position).

**Signature of Inspector**

Inspection Proforma for Postgraduate courses  
**(Anatomy)**

1. Name of Institution: \_\_\_\_\_

BFUHS Reference No.: \_\_\_\_\_

2. Particulars of the Inspector:-

Inspection Date \_\_\_\_\_

Name ..... Designation ..... Specialty ..... Name & Address of Institute/College ..... ..... .....	<b>Residential Address (with Pin Code)</b> ..... ..... Phone .(Off) .....(Resi.) ..... (Fax)..... Mobile No. .... E-mail: .....
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3. Institutional Information

Particulars of college

Item	College	Chairman/ Health Secretary	Director/ Dean/ Principal	Medical Superintendent
Name				
Address				
State				
Pin Code				
Phone (Off.) (Res.) (Fax)				
Mobile No.				
E-mail				

Signature of Dean/Principal

Signature of Inspector

**PART – I****(Institutional Information)****1 Particulars of Director / Dean / Principal:***(Who so ever is Head of Institution)*

Name: \_\_\_\_\_ Age: \_\_\_\_\_ (Date of Birth) \_\_\_\_\_

PG Degree	Subject	Year	Institution	University
<i>Recognised / Not Recognized</i>				

**Teaching Experience**

Designation	Institution	From	To	Total experience
Asstt Professor				
Assoc Professor/Reader				
Professor				
			<b>Grand Total</b>	

**2. Central Library**

- Total number of Books in library: \_\_\_\_\_
- Books pertaining to Anatomy: \_\_\_\_\_
- Purchase of latest editions of books in last 3 years: Total: \_\_\_ Anatomy books \_\_\_\_\_
- Journals:

Journals	Total	Anatomy
Indian		
Foreign		

- Year / Month up to which latest Indian Journals available: \_\_\_\_\_
- Year / Month up to which latest Foreign Journals available: \_\_\_\_\_
- Internet / Med pub / Photocopy facility: available / not available
- Library opening times: \_\_\_\_\_
- Reading facility out of routine library hours: available / not available

**3. Casualty:/ Emergency Department**

Space	
Number of Beds	
No. of cases (Average daily OPD and Admissions):	
Emergency Lab in Casualty (round the clock):	available / not available
Emergency OT and Dressing Room	
Staff (Medical/Paramedical)	
Equipment available	

**4. Blood Bank**

(i)	Valid License	Yes / No
(ii)	Blood component facility available	Yes / No

**Signature of Inspector**

(iii)	All Blood Units tested for Hepatitis C,B, HIV	Yes / No	
(iv)	Nature of Blood Storage facilities (as per specifications)	Yes / No	
(v)	Number of Blood Units available on inspection day		
(vi)	Average blood units consumed daily ( give distribution in various specialties)	Average daily	On inspection day

#### 5. Central Research Lab:

- Whether it exists? Yes No
- Administrative control:
- Staff:
- Equipment:
- Workload:

#### 6. Central Laboratory:

- Controlling Department:
  - Working Hours:
  - Investigative workload:
- (Approximate number of investigations done daily)

Radiology: On inspection day Average (monthly)			Microbiology: On inspection day Average (monthly)		
Plain X-Rays			Bacteriology		
CT Scans			Serology		
MR Scans			Mycology		
Mammography			Parasitology		
Barium studies / IVP			Virology		
Ultrasonography			Immunology		
DSA					
Others					

Pathology On inspection day Average (monthly)			Biochemistry On inspection day Average (monthly)		
Haematology			Blood chemistry		
Histopathology			Endocrinology		
FNAC			Other fluids		
Cytology					

Radiotherapy (Optional)	
Radiotherapy	
Teletherapy	
Brachy therapy	

#### 7. Operation Theatres:

AC / Non AC		Number of OTs functional per day	
Numbers		Number of days operations carried out	
Pre-Anaesthetic clinic		Average No. of case operated daily (Entire hospital)	Major Minor Total
Post-Anaesthetic care area			
Resuscitation arrangements	Adequate /Inadequate	Equipments	

Signature of Inspector

8. Central supply of Oxygen / Suction: Available / Not available  
 9. Central Sterilization Department Adequate / Not adequate  
 10. Laundry: Manual/Mechanical/Outsourced:  
 11. Kitchen Gas / Fire  
 12. Incinerator: Functional / Non functional Capacity: Outsourced
13. Bio-waste disposal Outsourced / any other method  
 14. Generator facility Available / Not available  
 15. Medical Record Section: Computerized / Non computerized
16. Recreational facilities: Available / Not available

Play grounds	Gymnasium
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17 Hostel facilities

UGs (No. of Rooms)		Interns (No. of Rooms)		PGs (No. of Rooms)	
Boys	Girls	Boys	Girls	Boys	Girls

18. Residential accommodation for Staff / Paramedical staff Adequate / Inadequate
19. Ethical Committee (Constitution):  
*(Specify number of meetings held annually & minutes thereof)*

20. Medical Education Unit (Constitution)  
*(Specify number of meetings held annually & minutes thereof)*

**Director/ Dean/ Principal**

**Signature of Inspector**



**PART – II (Departmental Information)****1 Department inspected: Anatomy****2 Particulars of HOD**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ (Date of Birth) \_\_\_\_\_

PG Degree	Year	Institution	University
<i>Recognised/ Not Recognized</i>			

**Teaching Experience**

Designation	Institution	From	TO	Total experience
Asstt Professor				
Assoc Professor/Reader				
Professor				
			Grand Total	

a) **Purpose of Present inspection:** Grant of Permission/ Recognition/ Increase of seats /  
Renewal of recognition/Compliance Verification

b) **Date of last MCI inspection & University Inspection of the department:**

\_\_\_\_\_

c) **Purpose of Last Inspection:** \_\_\_\_\_

d) **Result of last Inspection:** \_\_\_\_\_

(Copy of MCI letter & University letter be attached)

**3 Mode of selection** (actual/proposed) of PG students.

**4 If course already started, year wise number of PG students admitted and available PG teachers during the last 5 years:**

Year	No. of PG students admitted		No. of PG Teachers available in the dept. (give names)
	Degree	Diploma	

**5 Departmental General facilities:**

Total number of Laboratories in the department:.....

Nomenclature	Dissection Hall	Histology lab.	Museum	Research Lab.	Embarking Room	Seminar Room	Demonstration rooms	Any other lab.
Size (Area)								
Capacity								
Water Supply								
Sinks								
Electric points								
Cupboards for storage & Microscopes								
List of equipments								

**Signature of Inspector**

# Teaching Staff:

S. No.	Designation	Name with Date of Birth	Nature of employment Full time/part time/Hon.	PAN Number	TDS deducted	PG QUALIFICATION			Experience Date wise teaching experience with designation & Institution					
						Subject with Year of passing	Institution	University	Designation	Institution	From	To	Total Period	* Benefit of publications in promotion Yes/No, if yes List publications

\*Publications : Give only full articles in indexed Journals published during the period of promotion

Signature of Inspector

\* Has any of these faculty members been considered in PG/UG inspection at any other college or any other subject in this college after 01.03.2014. If yes, give details.

**6** List of Faculty joining and leaving after last inspection:

DESIGNATIONS	NUMBER	NAMES	
		JOINING FACULTY	LEAVING FACULTY
Professor			
Associate Prof.			
Assistant Prof.			
SR/Tutor/Demons.			
Others			

**7** List of Non-teaching Staff in the department: -

S.No.	Name	Designation

**8.** Facilities/areas available:

- Departmental museum
- Space
- No. of specimens
- Charts/diagrams
- Imaging Section
- Catalogues

**9.** Dissection Hall:

- Number of tables (Large/Small)
- Number of cadavers
- Cooling chamber
- Embanking room
- Ventilation of dissection hall

**10.** Any other facility available

**11.** Specialty laboratory being run by the department

S.No.	Name of the lab.
1	Histology & Histo-chemistry
2	Embryology
3	Neuro-Anatomy
4	Genetics
5	Immunology
6	Any other

**Signature of Inspector**

## 12 Departmental Library:

- Total No. of Books.
- Purchase of latest editions in last 3 years.
- No. of Journals

## 13 Departmental Research Lab.

- Space
- Equipment
- Research projects utilizing Deptt research lab.

## 14 Departmental Museum (Wherever applicable).

- Space:
- No. of specimens
- Charts/ Diagrams.

## 15 Office space:

Departmental Office

- Space
- Staff (Steno /Clerk).
- Computer/ Typewriter:  
Asstt Prof.

Office Space for Teaching Faculty

HOD  
Professors  
Assoc. Prof  
Residents

## 16. Seminars/Journal Clubs

## 17. Publications from the department during the last 3 years in indexed and non-indexed journals.

- No. of publications from the department during the last three years.
 

	Indexed	Non-indexed.
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18 **\*Equipments: List of important equipments available and their functional status***(List here only – NO annexure to be attached)*

Number of Microscopes	
Number of special Microscopes	
Microscopes with camera	
Computer with Printers	
Internet Facility	
Dissection Instrument	
Band saw	
Trays	
LCD screens	
Digital Image analyzer	
Any other	

\*Equipment needed for UG teaching compulsory

## 19. Academic outcome based parameters

- (a) Theory classes taken in the last 12 months –  
(Dates, Subjects, Name & Designation  
of teachers, Attendance sheet)

Number \_\_\_\_\_  
Available & Verified/  
Not available

**Signature of Inspector**

- (b) Clinical Seminars in last 12 months  
(Dates, Subjects, Name & Designation  
of teachers, Attendance sheet)      Number \_\_\_\_\_  
Available & Verified/  
Not available
- (c) Journal Clubs held in last 12 months  
(Dates, Subjects, Name & Designation  
of teachers, Attendance sheet)      Number \_\_\_\_\_  
Available & Verified/  
Not available
- (d) Case presentations held in last 12 months  
(Dates, Subjects, Name & Designation  
of teachers, Attendance sheet)      Number \_\_\_\_\_  
Available & Verified/  
Not available
- (e) Group discussions held in last 12 months  
(Dates, Subjects, Name & Designation  
of teachers, Attendance sheet)      Number \_\_\_\_\_  
Available & Verified/  
Not available
- (f) Guest lectures held in last 12 months  
(Dates, Subjects, Name & Designation  
of teachers, Attendance sheet)      Number \_\_\_\_\_  
Available & Verified/  
Not available
- 20.** Any other information.

**Director / Dean / Principal**

**Head of Department**

**Signature of Inspector**

**PART III**

**POSTGRADUATE EXAMINATION (Only At the Time Of Inspection)**

1. Minimum prescribed period of training.
2. Minimum prescribed essential attendance.
3. Periodic performance appraisal done or not?
4. Whether the candidates appearing in the examination have submitted their thesis six months before appearing in examination as per PG Regulations.2000?
5. Whether the thesis submitted by the candidates appearing in the examination been accepted or not?
6. Whether the candidates appearing in the examination have (i) presented one poster (ii) read one paper at National/State conference and presented one research paper which has been published/accepted for publication/sent for publication during period of their postgraduate study period.
7. Details of examiners appointed by Examining University.
8. Whether appointment of examiners, their eligibility & conduct of examination is as per prescribed MCI norms or not ?
9. Standard of Theory papers and that of Clinical / Practical Examination:
  
10. Year of 1<sup>st</sup> batch pass out (mention name of previous/existing University)

Degree Course -----

**Signature of Dean/Principal/Director**

- Note: (i) Please do not appoint retired faculty as External Examiner  
(ii) There should be two internal and two external examiners. If there are no two internal examiners available in the department then only appoint three external examiners.

**Signature of Inspector**