

# The Annual Quality Assurance Report (AQAR) of the IQAC

All NAAC accredited institutions will submit an annual self-reviewed progress report to NAAC, through its IQAC. The report is to detail the tangible results achieved in key areas, specifically identified by the institutional IQAC at the beginning of the academic year. The AQAR will detail the results of the perspective plan worked out by the IQAC. (Note: The AQAR period would be the Academic Year. For example, July 1, 2012 to June 30, 2013)

## Part – A

### I. Details of the Institution

1.1 Name of the Institution	Mahatma Gandhi Institute of Medical Sciences
1.2 Address Line 1	Sevagram
Address Line 2	Wardha
City/Town	Wardha
State	Maharashtra
Pin Code	442102
Institution e-mail address	dean@mgims.ac.in
Contact Nos.	07152-284343 extn - 209
Name of the Head of the Institution:	Dr KR Patond
Tel. No. with STD Code:	07152-284343 extn - 210

Mobile:

Name of the IQAC Co-ordinator:

Mobile:

IQAC e-mail address:

1.3 NAAC Track ID MHCOGN 14407 (Previous ID EC/56/A&A/046)

1.4 Website address:

Web-link of the AQAR:

### 1.5 Accreditation Details

Sl. No.	Cycle	Grade	CGPA	Year of Accreditation	Validity Period
1	1 <sup>st</sup> Cycle	A	3.16	2011	5
2	2 <sup>nd</sup> Cycle	A	3.30	2017	5
3	3 <sup>rd</sup> Cycle				
4	4 <sup>th</sup> Cycle				

1.6 Date of Establishment of IQAC : DD/MM/YYYY

1.7 AQAR for the year (*for example 2010-11*)

1.8 Details of the previous year's AQAR submitted to NAAC after the latest Assessment and Accreditation by NAAC (*for example AQAR 2010-11 submitted to NAAC on 12-10-2011*)

- i. AQAR 2011-12          26/06/2013(received)
- ii. AQAR 2012-13        28/02/2014 (received)
- iii. AQAR 2013-14       19/06/2015 (received)
- iv. AQAR 2014-15        17/08/2016 (received)
- v. AQAR 2015-16         01/12/2016 (received)

1.9 Institutional Status

University                              State  Central  Deemed  Private

Affiliated College                    Yes  No

Constituent College                Yes  No

Autonomous college of UGC       Yes  No

Regulatory Agency approved Institution    Yes  No

(eg. AICTE, BCI, MCI, PCI, NCI)

Type of Institution    Co-education  Men  Women

Urban  Rural  Tribal

Financial Status          Grant-in-aid  UGC 2(f)  UGC 12B

Grant-in-aid + Self Financing  Totally Self-financing

1.10 Type of Faculty/Programme

Arts  Science  Commerce  Law  PEI (Phys Edu)

TEI (Edu)  Engineering  Health Science  Management

Others (Specify)

1.11 Name of the Affiliating University (*for the Colleges*)

Maharashtra University of Health Sciences, Nashik

1.12 Special status conferred by Central/ State Government-- UGC/CSIR/DST/DBT/ICMR etc

Autonomy by State/Central Govt. / University

University with Potential for Excellence

UGC-CPE

DST Star Scheme

UGC-CE

UGC-Special Assistance Programme

DST-FIST

UGC-Innovative PG programmes

Any other (*Specify*)

UGC-COP Programmes

## **2. IQAC Composition and Activities**

2.1 No. of Teachers

8

2.2 No. of Administrative/Technical staff

5

2.3 No. of students

2

2.4 No. of Management representatives

3

2.5 No. of Alumni

5

2.6 No. of any other stakeholder and  
community representatives

0

2.7 No. of Employers/ Industrialists

2.8 No. of other External Experts

2.9 Total No. of members

2.10 No. of IQAC meetings held

2.11 No. of meetings with various stakeholders: No.  Faculty   
 Non-Teaching Staff  Students  Alumni  Others

2.12 Has IQAC received any funding from UGC during the year? Yes  No

If yes, mention the amount

2.13 Seminars and Conferences (only quality related)

(i) No. of Seminars/Conferences/ Workshops/Symposia organized by the IQAC

Total Nos.  International  National  State

Institution Level

(ii) Themes

2.14 Significant Activities and contributions made by IQAC

1. MGIMS reaccredited with A grade in second cycle of NAAC
2. Model Maternal and Child Wing functional in Kasturba Hospital
3. MGIMS entrance now begins exclusively based on NEET scores
4. MCI approves increase in MBBS seats from 65 to 100
5. New operation theatre complex now functional
6. Diabetic Retinopathy Screening and Treatment programme for Wardha District launched
7. UNESCO Bioethics wing established at MGIMS
8. First National Bioethics, Medical and Research Conference (ETHOS 2017) organized by undergraduate students
9. MGIMS scores highest at Labs for Life assessment
10. Construction for Skills Centre for National Emergency Life Support training begins

2.15 Plan of Action by IQAC/Outcome

The plan of action chalked out by the IQAC in the beginning of the year towards quality enhancement and the outcome achieved by the end of the year \*

Plan of Action	Achievements
1. To obtain better accreditation score than cycle 1	- MGIMS reaccredited with A grade in second cycle of NAAC with an improved score of 3.30
2. To streamline selection process in line with national guidelines	- MGIMS entrance now begins exclusively based on NEET scores - MCI approves increase in MBBS seats from 65 to 100
3. To improve patient facilities	- New operation theatre complex now functional - Model Maternal and Child Wing functional in Kasturba Hospital
4. To ensure quality assurance of laboratories	- All MGIMS laboratories enrolled in Labs for Life Programme conducted by MOHFW, CDC Atlanta and NACO. MGIMS scores highest in assessment carried out by Labs for Life
5. To improve exposure of students to humanities	- UNESCO Bioethics wing established at MGIMS - First National Bioethics, Medical and Research Conference (ETHOS 2017) organized by undergraduate students - Theatre of the Oppressed Workshop conducted at MGIMS
6. To improve skills teaching	- Construction for Skills Centre for National Emergency Life Support training begins -
7. To provide preventive and curative patient care in community	- Diabetic Retinopathy Screening and Treatment programme for Wardha District launched

\* Attach the Academic Calendar of the year as Annexure 2.

2.15 Whether the AQAR was placed in statutory body Yes  No

Management  Syndicate  Any other body

Provide the details of the action taken

This was tabled in the Local Management Committee meeting as an Annual Report. The meeting was held on 24 Aug 2017. The report was approved and then forwarded to the Governing Council.

## Part – B

### Criterion – I

#### I. Curricular Aspects

##### 1.1 Details about Academic Programmes

Level of the Programme	Number of existing Programmes	Number of programmes added during the year	Number of self-financing programmes	Number of value added / Career Oriented programmes
PhD	9			
PG	20			4
UG	1			6
PG Diploma	3			
Advanced Diploma				
Diploma				
Certificate				
Others				
<b>Total</b>	33			10
Interdisciplinary				2
Innovative		1		1

##### 1.2 (i) Flexibility of the Curriculum: CBCS/**Core**/Elective option / Open options

##### (ii) Pattern of programmes:

Pattern	Number of programmes
Semester	
Trimester	
Annual	All programmes are Annual

1.3 Feedback from stakeholders\* (On all aspects) Alumni  Parents  Employers  Students   
 Mode of feedback : Online  Manual  Co-operating schools (for PEI)

\*Please provide an analysis of the feedback in the Annexure 3

1.4 Whether there is any revision/update of regulation or syllabi, if yes, mention their salient aspects.

No, as this institute is affiliated to MUHS Nashik. However feedback about necessary changes required in the curriculum is submitted to the University through Board of Studies Members and Management Council members of the institute. Changes based on competency based curriculum prescribed by MCI have been communicated to us through MUHS. Bioethics training has been introduced for I MBBS. We have started workshop on developing good study skills for students.

1.5 Any new Department/Centre introduced during the year. If yes, give details.

1. New operation theatre complex is now functional
2. New Model Maternal and Child wing is now operational

## Criterion – II

### 2. Teaching, Learning and Evaluation

2.1 Total No. of permanent faculty

Total	Asst. Professors	Associate Professors	Professors	Others
142	51	32	59	0

2.2 No. of permanent faculty with Ph.D. -

2.3 No. of Faculty Positions Recruited (R) and Vacant (V) during the year

Asst. Professors		Associate Professors		Professors		Others		Total	
R	V	R	V	R	V	R	V	R	V
22	6	1	3	0	2	0	0	23	11

2.4 No. of Guest and Visiting faculty and Temporary faculty -



2.5 Faculty participation in conferences and symposia:

No. of Faculty	International level	National level	State level
Attended	9	91	263
Presented papers	10	37	96
Resource Persons	4	30	61

2.6 Innovative processes adopted by the institution in Teaching and Learning:

- Bioethics training started. The institute is now affiliated to UNESCO HAIFA Bioethics Programme. UNESCO Bioethics wing established at MGIMS
- Workshops on developing good study skills conducted

2.7 Total No. of actual teaching days

275

during this academic year

2.8 Examination/ Evaluation Reforms initiated by the Institution (for example: Open Book Examination, Bar Coding, Double Valuation, Photocopy, Online Multiple Choice Questions)

Examination reforms have been initiated by University based on recommendations of institutional faculty who are Board of Studies members: (a) online paper setting has been started by MUHS (b) Double valuation of papers has begun. (c) Students are provided photocopy of their answer sheets on request from University (d) Paper revaluation has been stopped (e) Paper setters are provided with unique passwords and multiple paper sets are prepared (f) Closed circuit TV installed both in theory examination halls and practical halls according to MUHS guidelines (g) Internal vigilance squad appointed.

2.9 No. of faculty members involved in curriculum restructuring/revision/syllabus development

7

2

3

as member of Board of Study/Faculty/Curriculum Development workshop

2.10 Average percentage of attendance of students

70% for theory and 80% for practicals

2.11 Course/Programme wise distribution of pass percentage :

Title of the Programme	Total no. of students appeared	Division				
		Distinction %	I %	II %	III %	Pass %
I MBBS	97	13.4	63.9	20.6	Nil	97.94
II MBBS	68	8.8	73.5	10.2	Nil	96.92
III MBBS Part-1	107	5.6	60.7	30.8	Nil	97.19
III MBBS Part-2	104	0	58.6	31.7	Nil	90.38

#### 2.12 How does IQAC Contribute/Monitor/Evaluate the Teaching & Learning processes:

- Once the regular IQAC meetings are conducted, the quality control mechanisms are formulated. This message is disseminated to the faculty through the Curriculum Committee notifications and circulars or during College Council meetings. Feedback collected is fed into the cycle and changes are made as required.
- This process takes care of planning time tables, schedules, coordinating between departments, assessment schedules etc.
- IQAC collects and analyzes student feedback
- Internal vigilance squad is in place
- Others as per university rules

#### 2.13 Initiatives undertaken towards faculty development

<i>Faculty / Staff Development Programmes</i>	<i>Number of faculty benefitted</i>
Refresher courses	309
UGC – Faculty Improvement Programme	
HRD programmes	
Orientation programmes	26
Faculty exchange programme	
Staff training conducted by the university	
Staff training conducted by other institutions	39
Summer / Winter schools, Workshops, etc.	154
Others(consultative meeting)	49

## 2.14 Details of Administrative and Technical staff

Category	Number of Permanent Employees	Number of Vacant Positions	Number of permanent positions filled during the Year	Number of positions filled temporarily
Administrative Staff	89	5	7	1
Technical Staff	373	3	1	22

## Criterion – III

### 3. Research, Consultancy and Extension

#### 3.1 Initiatives of the IQAC in Sensitizing/Promoting Research Climate in the institution

- The IQAC coordinates organization of Research Methodology workshops for postgraduate guides and new post-graduate students
- Promotes and provides guidance to undergraduate students to apply for research scholarship under ICMR-STS scheme, MUHS short term Research grant scheme
- Postgraduate students are now given grants of upto Rs 25000 each by Kasturba Health Society for their thesis purpose, based on the quality of their projects.
- Faculty are encouraged to apply for funded research projects and publish in indexed and peer reviewed journals
- Award for best undergraduate research work instituted

#### 3.2 Details regarding major projects

	Completed	Ongoing	Sanctioned	Submitted
Number	5	40	40	5
Outlay in Rs. Lakhs		511.44		

#### 3.3 Details regarding minor projects

	Completed	Ongoing	Sanctioned	Submitted
Number	60	57 (PG thesis)	57	60
Outlay in Rs. Lakhs	0.85 (UG)	3.23		

#### 3.4 Details on research publications

	International	National	Others
Peer Review Journals	49	103	
Non-Peer Review Journals		1	
e-Journals		2	
Conference proceedings			

3.5 Details on Impact factor of publications: Pubmed indexed: 38

Range  Average  h-index  Nos. in SCOPUS

3.6 Research funds sanctioned and received from various funding agencies, industry and other organisations

Nature of the Project	Duration Year	Name of the funding Agency	Total grant sanctioned	Received
Major projects	2016-17	See annexure	51144000	51144000
Minor Projects	2016-17	KHS (Thesis PG)	323000	323000
Interdisciplinary Projects				
Industry sponsored				
Projects sponsored by the University/ College	2016-17	MUHS	5000	5000
Students research projects <i>(other than compulsory by the University)</i>	2016-17	ICMR-STC	80,000	80,000
Any other(Specify)				
Total			51552000	51552000

See annexure 4

3.7 No. of books published i) With ISBN No.  Chapters in Edited Books

ii) Without ISBN No.

3.8 No. of University Departments receiving funds from

ICMR-4 UGC-SAP  CAS  DST-FIST   
DPE  DBT Scheme/funds

3.9 For colleges Autonomy  CPE  DBT Star Scheme   
INSPIRE  CE  Any Other (specify)

Institutional policy states that though we are involved in consultancy to national and international groups, individuals do not accept any revenue.

3.10 Revenue generated through consultancy

3.11 No. of conferences /CMEs organized by the Institution

Level	International	National	State	University	College
Number	1	16	5	1	20
Sponsoring agencies	AHA	DBT, UNESCO, ICMR, Student BMJ, Labs for life, MOHFW, Queen Elizabeth Diamond Jubilee Trust	NHM Maharashtra, IMA	MUHS	KHS

3.12 No. of faculty served as experts, chairpersons or resource persons

3.13 No. of collaborations International  National  Any other   
State

MGIMS carries out research in collaboration with the following agencies: ICMR, PATH/SIIL, WHO SEARO, DST, DBT, Govt of India, Govt of Maharashtra, IARC, UGC and MUHS

3.14 No. of linkages created during this year - 4

3.15 Total budget for research for current year in lakhs :

Total

The funding is received from Govt of India (50%), Govt of Maharashtra (25%) and Kasturba Health Society (25%)

3.16 No. of patents received this year -- Nil

Type of Patent		Number
National	Applied	
	Granted	
International	Applied	
	Granted	
Commercialised	Applied	
	Granted	

3.17 No. of research awards/ recognitions received by faculty and research fellows Of the institute in the year

Total	International	National	State	University	Dist	College
42	3	18	8	3	8	2

3.18 No. of faculty from the Institution who are Ph. D. Guides

and students registered under them

Nil

3.19 No. of Ph.D. awarded by faculty from the Institution

4

3.20 No. of Research scholars receiving the Fellowships (Newly enrolled + existing ones)

JRF

SRF

Project Fellows

Any other

3

3.21 No. of students Participated in NSS events:

University level

State level

100

National level

International level

3.22 No. of students participated in NCC events:

University level

State level

National level

International level

3.23 No. of Awards won in NSS:

University level

State level

National level

International level

3.24 No. of Awards won in NCC:

University level

State level

National level

International level

3.25 No. of Extension activities organized

University forum

College forum

NCC

NSS

Any other

3.26 Major Activities during the year in the sphere of extension activities and Institutional Social Responsibility

- **Orientation camp:** Carried out each year where the newly admitted batch of students stay for a fortnight in Bapu Kutti. They are ingrained Gandhian values and taught the value of ethics, simplicity and morality. They perform shramdan and spin khadi. Classes on Anatomy, Physiology and Biochemistry are also conducted.
- **Village adoption scheme and Social service camp:** Students of each batch adopt a nearby village. Students stay in the village for a fortnight. They are taught to survey the lifestyle of villagers and study sanitation, hygiene and nutrition. Specialists visit the camp and screen villagers for common ailments like anemia, sickle cell disease, diabetes, microfilaria, parasites etc. Ophthalmic screening is done for refractory errors and gynaecological screening is also done.
- **ROME camp:** Final year students stay in the Rural Training Centres. They are taught about the health care delivery system at the primary and secondary levels. They are also taught about National Health Programmes in the camp
- **Multispeciality hospital started for tribal people at Utavali, Melghat:** KHS has constructed a new multispeciality Dr Sushila Nayar Hospital to serve the poor tribals of Melghat. The hospital is located in Utawali in Amravati district.

## Criterion – IV

### 4. Infrastructure and Learning Resources

#### 4.1 Details of increase in infrastructure facilities:

Facilities	Existing	Newly created	Source of Fund	Total
Campus area	458.25 acres			458.25 acres
Class rooms	7	-		7
Laboratories	11	-		11
Seminar Halls	22	-		22
No. of important equipments purchased ( $\geq$ 1-0 lakh) during the current year.				31
Value of the equipment purchased during the year (Rs. in Lakhs)				820.58
Others				

#### NEW EQUIPMENT

##### Anesthesia

Advanced anesthesia workstations with integrated multipara AGM and ventilator

Advanced multipara monitor with AGM monitoring

Biphasic defibrillator with transcutaneous pacemaker

Fibreless intubating bronchoscopes

Disposable flexible intubating bronchoscopes

Portable USG machine for nerve blocks and 2D  
 TT Echo  
 Disaster trolleys  
 Nerve-Locator-Mapper

**Microbiology**

Vitek 2  
 Binocular microscopes  
 Autoclave  
 -80° C Deep freezer

**Obstetrics and Gynecology**

Digital colposcope

**Ophthalmology**

Posterior segment optical coherence tomography system  
 Nd-Yag III Laser Unit  
 Operating microscope  
 Diode green laser for photocoagulation with laser lenses  
 High speed sterilizer  
 Non-mydratic fundus camera  
 Fundus fluorescein angiography unit  
 Slit lamp microscope

Auto refractometer  
 Ethylene oxide gas sterilizer

**Pathology**

Five-part differential automated hematology cell analyzer  
 Automatic tissue processor

**Radiology**

600mA X ray machine  
 800mA X ray machine with IITV  
 100 mA portable X-ray machine

**Radiotherapy**

Dual energy with electron linear accelerator Clinac IX compatible with IMRT

4.2 Computerization of administration and library

- Separate server installed for library
- New library management software installed
- Online access to digital journals using campus wifi
- UpToDate: evidence based decision support software available to all faculty and students on campus server
- DELNET (IMedC) services made available
- Infotract collection subscribed
- New library building under construction

4.3 Library services

	Existing		Newly added		Total	
	No.	Value	No.	Value	No.	Value
Text Books	9067		198	6,97,161.00	9265	
Reference Books	19060		322		19382	



e-Books			36		36	
<b>Journals</b>						
Indian			75 (45 Print + 30 Free Online)	60,55,254.00		
Foreign			64 (48 Print + Online 16)			
e-Journals			16 Subscribed + 243 ERMED Consortium, NML			
Digital Database			<ul style="list-style-type: none"> <li>• UpToDate</li> <li>• IMedC from DELNET</li> <li>• IndMED</li> <li>• Digital Library of MUHS, Nashik</li> </ul>			
CD & Video	1349		33		1382	
<b>Others (specify)</b>						
Donated books	6517		74		6591	
Bound Journals	17573		282		17855	
WHO Publications	1340		-		1340	
Year books	609		-		609	
Thesis	905		113		1018	

#### 4.4 Technology up gradation (overall)

	Total Computers	Computer Labs	Internet	Browsing Centres	Computer Centres	Office	Departments	Others
Existing	323	1	1 Gbps	Library BIC	1	All	All	
Added	15 (17 condemned)							

Total	321			2	1	All	All	
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4.5 Computer, Internet access, training to teachers and students and any other programme for technology upgradation (Networking, e-Governance etc.)

The Hospital Information System (HIS) at MGIMS is a state-of-the-art, fully integrated hospital information system. The system provides the health workers in the hospital with a full suite of tools for registering patients, ordering tests, retrieving test results and generating electronic discharge summaries. It was introduced in 2005.

This system captures, stores and retrieves all data related to half a million outpatients and 45,000 inpatients every year. Most laboratories are paperless now, and residents and consultants are able to access all test results, radiologic images- anytime anywhere. The system has close to 18 modules- all functioning – that capture data from registration, insurance, admission counters, outpatient departments, labs (Pathology, Microbiology, Biochemistry and radiology), inpatient departments, blood bank, operating rooms, Pharmacy, Kitchen and discharge counter. A Picture Archival and Communication System (PACS) now enables doctors to access the radiology images (radiographs, CT images, MRI images and USG) on their desktops.

Free high speed wi-fi is available all over campus. The unique addition to the system is the use of iPads at the point of care- now the doctors can access the patient data at the bedside itself. This application – specially designed and developed for MGIMS- has been introduced for the first time in India- no public or private hospital in the country is using iPads at the point of care. They can peep into the patients’ records, review past histories, and generate electronic discharge summaries using this system. The system has minimized human errors, increased the accuracy of data and improved patient outcomes.

4.6 Amount spent on maintenance in lakhs :

i) ICT	54.18
ii) Campus Infrastructure and facilities	625.27
iii) Equipments	205.92
iv) Others	36.29
<b>Total :</b>	<b>921.66</b>

## Criterion – V

### 5. Student Support and Progression

#### 5.1 Contribution of IQAC in enhancing awareness about Student Support Services

- Book bank schemes for economically needy launched
- Alumni contribute to tuition fees of needy students
- Financial assistance schemes and scholarships available to students from underprivileged backgrounds
- Workshop on Developing Good Study Skills organized by Medical Education Unit

#### 5.2 Efforts made by the institution for tracking the progression

- The mentoring cell regularly reviews mentor-mentee meetings. It compiles feedback reports received from mentors, analyzes it. This is discussed with management. Action taken is shared with students
- The IQAC collects feedback from students, analyzes it and shares it with faculty. The feedback is shared with faculty in the college council. Action taken is shared with students

5.3 (a) Total Number of students

569

UG 361, PG 197, PhD-11

(b) No. of students outside the state

220

UG 178, PG 42, PhD-0

(c) No. of international students

NA

	No	%
Men	285	51.07%

Women

	No	%
Women	273	48.9

Last Year 2015-16						This Year 2016-17					
General	SC	ST	OBC	Physically Challenged	Total	General	SC	ST	OBC	Physically Challenged	Total
49	12	12	23	0	96	51	12	11	23	3	100

Demand ratio Not available as admission is done by NEET Dropout % 0

#### 5.4 Details of student support mechanism for coaching for competitive examinations (If any)

Students are trained in NEET style multiple choice questions in all departments after the completion of each unit. Books related to competitive examinations are purchased by the library each year on the request of students. Any student can request for specific books to be purchased.

No. of students beneficiaries

All

#### 5.5 No. of students qualified in these examinations: Not applicable

NET

SET/SLET

GATE

CAT

IAS/IPS etc

State PSC

UPSC

Others

#### 5.6 Details of student counselling and career guidance

Student guidance and counseling center is functional. It operates between Monday to Friday from 3-5 pm. On holidays team members are contactable on mobile.

No. of students benefitted

6

#### 5.7 Details of campus placement (Rural placement scheme)

<i>On campus</i>		<i>Off Campus</i>	
Number of Organizations Visited	Number of Students Participated	Number of Students Placed	Number of Students Placed
80 rural centres			32

### 5.8 Details of gender sensitization programmes

Special sessions are conducted during the Orientation camp at the Gandhi ashram and during Social Service camp where these issues are discussed with students

### 5.9 Students Activities

#### 5.9.1 No. of students participated in Sports, Games and other events

State/ University level  National level  International level

No. of students participated in cultural events

State/ University level  National level  International level

#### 5.9.2 No. of medals /awards won by students in Sports, Games and other events

Sports : State/ University level  National level  International level

Cultural: State/ University level  National level  International level

### 5.10 Scholarships and Financial Support

	Number of students	Amount
Financial support from institution	20	514000
Financial support from government	146	8858967
Financial support from other sources	4	24000
Number of students who received International/ National recognitions	-	-

### 5.11 Student organised / initiatives

Fairs : State/ University level  National level  International level

Exhibition: State/ University level

National level

International level

5.12 No. of social initiatives undertaken by the students

1

5.13 Major grievances of students (if any) redressed: not received any

## **Criterion – VI**

### **6. Governance, Leadership and Management**

6.1 State the Vision and Mission of the institution

In the spirit of its Founder, the Mahatma Gandhi Institute of Medical Sciences, Sevagram today is committed to the pursuit of professional excellence by evolving an integrated pattern of medical education and it seeks to provide accessible and affordable health care primarily to underprivileged rural communities.

1.2 Does the Institution has a Management Information System

Yes. The institute has installed an advanced information system. All accounts, personnel information, student information, stocks etc are handled online

6.3 Quality improvement strategies adopted by the institution for each of the following:

#### **6.3.1 Curriculum Development**

- A curriculum committee handles all curriculum related issues. Representatives from all departments are part of this committee.
- Suggestions for improvement in curriculum are sent to the University for improvement via Board of Studies members from the institute
- Six faculty from the institute are on the Board of Studies. Three of them have been involved in Curriculum development at MUHS level and one at MCI level
- Basic medical education workshops have special time dedicated to teaching faculty about curriculum development
- MEU Faculty and senior level faculty were specially trained in curriculum planning this year

### 6.3.2 Teaching and Learning

- It is mandatory for each teacher to undergo the Basic Medical Education Workshop. These workshops are conducted regularly by the MEU
- Each department takes feedback from its students and carries out innovations in its teaching strategies accordingly
- Feedback collected from students
- Small group teaching is encouraged.
- Problem based learning introduced
- Skills lab training included in curriculum.

### 6.3.3 Examination and Evaluation

- University guidelines followed
- Vigilance squad ensures absence of cheating. CCTV cameras installed in examination hall
- Meticulous record keeping of internal assessment done. Marks submitted online to university regularly
- Students shown answersheets and given feedback after internal assessment

### 6.3.4 Research and Development

- Undergraduates mentored on how to apply for research projects. Encouraged to apply for ICMR STS projects and MUHS research grant
- Postgraduates have to undergo research methodology workshop mandatorily
- Presentation of thesis/ research protocol to ethics committee is mandatory

### 6.3.5 Library, ICT and physical infrastructure / instrumentation

- Online subscription to DELNET database established
- Further subscriptions for digital library through MUHS
- Library subscribes to Uptodate which is accessible to all through institutional wi-fi
- Issue of books and periodicals is done using an electronic software
- Computer and internet access available in library

### 6.3.6 Human Resource Management

- Personal promotion scheme exists for faculty: done on basis of pre-established criteria like quality of teaching, administration, research etc
- Excellence awards for Non Teaching staff to encourage
- Removing contract basis of non-teaching staff. Efforts to give them permanent jobs

6.3.7 Faculty and Staff recruitment

- Pooled through national level advertisements and interviews with University approved selection panel

6.3.8 Industry Interaction / Collaboration

-not applicable

6.3.9 Admission of Students

Through NEET for PG and UG

6.4 Welfare schemes for

- Health insurance scheme for all employees
- Group insurance scheme
- Provident fund
- Workers welfare fund

Teaching	4
Non teaching	4
Students	1

6.5 Total corpus fund generated

NA

The institute receives annual grants from Central and State government. No separate corpus is generated

6.6 Whether annual financial audit has been done

Yes

No



6.7 Whether Academic and Administrative Audit (AAA) has been done?

Audit Type	External		Internal	
	Yes/No	Agency	Yes/No	Authority
Academic	yes	MUHS	yes	College council
Administrative	Yes	CAG Audit	yes	M/S Mankeshwar and Co.

6.8 Does the University/ Autonomous College declares results within 30 days?

For UG Programmes      Yes       No

For PG Programmes      Yes       No

6.9 What efforts are made by the University/ Autonomous College for Examination Reforms?

The University has introduced online question paper setting. Examiners from inside and outside the state are given individual log-ins and thus a large number of questions paper sets are developed for each subject. Similarly MCQ question banks are also prepared. These are validated and moderated at the university

A separate committee for Examination Reforms at the University has taken several decisions to improve the assessment pattern. These include checking of each paper by two examiners (double evaluation), abolition of re-evaluation, preparation of model answers and availability of photocopies of answer sheets on request.

6.10 What efforts are made by the University to promote autonomy in the affiliated/constituent colleges?

Internal assessment marks are decided by constituent colleges. Record keeping of the same is regularly monitored by inspectors from the University. Colleges are asked to contribute suggestions for change in curricular and assessment formats on a regular basis. Each college is asked to submit annual reports

6.11 Activities and support from the Alumni Association

Financial support has been provided for needy students on the basis of merit and economic need. Alumni has contributed to upliftment of villagers in adopted villages by constructing toilets and performing other social activities

#### 6.12 Activities and support from the Parent – Teacher Association

Helps in raising student issues and resolving them by discussion and consensus

#### 6.13 Development programmes for support staff

- Regular training on biomedical waste management is conducted for faculty, nursing staff and attendants
- Teaching staff is given remuneration to attend one conference with evidence of paper presentation, or workshop each year. They are paid upto 30000 rupees to attend international conference once in every three years.
- Basic medical education workshop is conducted twice every year
- Research methodology workshop is conducted for postgraduate guides
- Workshops on biomedical waste management are conducted for all faculty, nurses and non-teaching staff
- Hospital information system conducts workshops as per requirement when new software is installed
- Training workshops are conducted for technical staff as per requirement

#### 6.14 Initiatives taken by the institution to make the campus eco-friendly

- Banning of plastic in campus
- Greenery all around: Garden section carries out plantation and tree plantation drives
- The Mahila Mandal unit creates art out of waste paper and sells it

## **7. Innovations and Best Practices**

7.1 Innovations introduced during this academic year which have created a positive impact on the functioning of the institution. Give details.

- All staff and students have signed an anti-ragging declaration to end this menace
- Criteria for personal promotion scheme has been upgraded, defined and implemented: makes the promotion scheme more transparent and acceptable to all
- Faculty have been encouraged to take up research. Guidance provided in terms of research methodology workshops. Funding opportunities circulated. And faculty engaging in research to get incentives such as more advantage during promotion interviews.
- Mentoring cell : Regular meetings conducted to train mentors and discuss issues faced by them. Students also invited to give their opinions about improving the programme.

7.2 Provide the Action Taken Report (ATR) based on the plan of action decided upon at the beginning of the year

- MGIMS entrance now begins exclusively based on NEET scores
- MCI approves increase in MBBS seats from 65 to 100
- New operation theatre complex now functional
- Model Maternal and Child Wing functional in Kasturba Hospital
- All MGIMS laboratories enrolled in Labs for Life Programme conducted by MOHFW, CDC Atlanta and NACO. MGIMS scores highest in assessment carried out by Labs for Life
- UNESCO Bioethics wing established at MGIMS
- First National Bioethics, Medical and Research Conference (ETHOS 2017) organized by undergraduate students
- Diabetic Retinopathy Screening and Treatment programme for Wardha District launched

7.3 Give two Best Practices of the institution (*please see the format in the NAAC Self-study Manuals*)

- Orientation Camp
- Community Mobilization

7.4 Contribution to environmental awareness / protection

Green campus: Plantations and greenery all over  
 Arogyadham: herbal medicines are grown  
 Plastic has been banned on campus. Pharmacy also sells medicine in paper bags

7.5 Whether environmental audit was conducted?

No

7.6 Any other relevant information the institution wishes to add. (for example SWOT Analysis)

IQAC studying recommendations of NAAC peer team and making modifications

**8. Plans of institution for next year**

1. Construction of Skills Centre for National Emergency Life Support to begin.
2. Kasturba Hospital plans to start cardiac surgery services
3. New hemodialysis Unit being constructed

*Name: Dr Anshu*



\_\_\_\_\_  
*Signature of the Coordinator, IQAC*

*Name Dr KR Patond*



\_\_\_\_\_  
*Signature of the Chairperson, IQAC*

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# Academic activities organized at MGIMS

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## Anesthesia and MGIMS Institute of Simulation Training

<b>Theme</b>	: <b>AHA accredited Workshop on Basic and Advanced Cardiac Life Support</b>
<b>Date</b>	: 16-18 Sep 2016
<b>Organizing secretary</b>	: Dr D Bhandari
<b>Delegates</b>	: 22
<b>Resource persons</b>	: Dr Bhandari D, Dr Jajoo S, Mrs Agnes L
<b>Key topics</b>	: Basic and Advanced Cardiovascular life support

## Biochemistry

<b>Theme</b>	: <b>22nd Short Term Training Course on ‘Molecular Techniques as Applied for Infectious Disease Research’</b>
<b>Date</b>	: 13-18 Feb 2017
<b>Organizing Secretary</b>	: Dr MVR Reddy
<b>Delegates</b>	: 14
<b>Resource persons</b>	: Dr Parija SC, Dr Kashyap RS, Dr Das A, Dr Reddy MVR, Dr Kumar S, Dr Goswami K
<b>Key Topics</b>	: Mycobacterial excretory secretory-31 protein with serine protease and lipase activities: An immunogen and drug target against tuberculosis infection; Stem cells: B for translational therapies; Recent developments in research on <i>Entamoebahistoltytica</i> ; Helminth induced immune modulation offers a new avenue to treat autoimmune and other inflammatory disorders in humans; Rising trends of neuro zoonotic diseases: A report from central India; Therapeutic targets of parasitic nematode and its possible implication in cancer. <b>Lab techniques:</b> Molecular biology techniques: PCR amplification, cloning expression and purification of recombinant proteins and real time PCR Immunological techniques: CIEP & Double diffusion, cellular, cytokine assays and NO estimation assay. <b>Analytical techniques:</b> AO/EB staining for detection of apoptosis, Dialysis and Ultra-membrane Filtration, Freeze Drying (Lyophilization), Counter Current Immuno Electrophoresis, SDS-PAGE, 2D-Gel electrophoresis, Western blotting. <b>In vitro cellular experiments:</b> In vitro immunomodulatory assay, Antigen driven cell proliferation assay, In vitro drug screening assay
<b>Funding agency</b>	: Department of Biotechnology (DBT), Govt of India

## Bioethics Unit

<b>Theme</b>	: <b>ETHOS 2017 –1st National Bioethics, Medical &amp; Research Conference: Implications and application of bioethics in current clinical practice and medical research</b>
<b>Date</b>	: 24-26 Feb 2017
<b>Organizing Secretary</b>	: Joshi S
<b>Delegates</b>	: 427
<b>Resource persons</b>	: D’Souza R, Jesani A, Misra MC, Kumar R, Mathews M, Kalantri SP, Bhan A, Srinivasan S

**Key topics** : Need for integrated bioethics, Reproductive Health Ethics, Good clinical practice- ethics materialized, Teleconsultation and medical ethics; Should doctors and patients be friends on Facebook?; Low cost medicine initiative; Transhumanism- A legitimate philosophy for human development or messing with nature; Research ethics in public health: Screening trials in cervical cancer

**Funding agencies** : UNESCO Chair in Bioethics (Haifa), ICMR, Medical Council of India, Indian National Science Academy, Kasturba Health Society, Maharashtra University of Health Sciences, Nashik, Student BMJ

**Theme** : **Preconference Workshop on Bioethics and identifying your values**

**Date** : 24 Feb 2017

**Workshop Coordinator** : D'Souza R

**Delegates** : 30

**Resource persons** : D'Souza R, Mathew M, Desousa A

**Key topics** : Historical evolution of the principles of ethics; Sanctity of doctor-patient relationships; Privacy, confidentiality and consent; Ethical decision making and ethical deliberation; Values and their importance; Personal values

**Theme** : **Preconference Workshop on Community Innovations**

**Date** : 24 Feb 2017

**Workshop Coordinator** : Raut AV

**Delegates** : 20

**Resource persons** : Garg BS, Raut AV, Kalantri A

**Key topics** : Village adoption scheme and longitudinal family study, community diagnosis, participatory learning and action

**Theme** : **Preconference Workshop: Theatre of the Oppressed- Breaking patterns, creating change**

**Date** : 24 Feb 2017

**Workshop Coordinator** : Anshu

**Delegates** : 30

**Resource persons** : Ramaswamy R

**Key topics** : Introductions, Theatre of the Oppressed, Using games and theatre to explore self

**Theme** : **Preconference Workshop on Interprofessional Team Building**

**Date** : 24 Feb 2017

**Workshop Coordinator** : Gupta SS

**Delegates** : 30

**Resource persons** : Gupta SS, Singh S, Jain V, Ramesh A, Shetye N

**Key topics** : Introductions and icebreaking, Need for interprofessional teams, health care settings where interprofessional teams are needed, Characteristics of effective interprofessional teams, Qualities to be good interprofessional team members, Barriers in forming interprofessional teams, organizational/structural changes to facilitate better interprofessional team building, Drexler-Sibbet team performance model, Tools for clinical communication, Tools for leadership, Trust: the key to building teams

**Theme** : **Preconference Workshop on Politics of Publications**  
**Date** : 24 Feb 2017  
**Workshop Coordinator** : Goswami K  
**Delegates** : 25  
**Resource persons** : Goswami K, Jesani A, Joshi R  
**Key topics** : How to choose a journal, how to write, reviewing literature, study design, statistical concepts, politics of publication, publication ethics

#### **JBTDRC and Bioinformatics Centre**

**Theme** : **19th Workshop on Computational and Structural Bioinformatics**  
**Date** : 9-10 Jan 2017  
**Organizing Secretary** : Dr S Kumar  
**Delegates** : 54  
**Resource persons** : Dr Mogli GD, Mr Rath SN, Dr Pradhan D, Dr Singh S, Mr Jena L, Mr Bhuyan R, Dr Guruprasad K, Dr Govekar R, Dr Sharma N, Dr Harinath BC, Dr Kumar S  
**Key Topics** : Health Informatics & BIC's Contributions – A brief review, What are the causes for diagnostic errors in healthcare delivery system?, Advances in molecular modeling tools and techniques for biomolecular interaction, Computer aided techniques for target based drug design, Structural specificity help design novel inhibitors against Leishmaniasis, Computational and bioinformatics techniques to predict the impact of mutation on protein structure, Studying protein-ligand interaction using MD simulation by GROMACS, Prediction of potential TB drug targets using bioinformatics, Proteomics in biomarker discovery, Nitrilase(s): Mining genome to structure analysis **Hands-on Sessions:** Healthcare delivery system, Computational and structural bioinformatics: Drug - target identification, Protein structure prediction and protein-ligand docking  
**Funding agency** : Department of Biotechnology (DBT), Govt of India

#### **Community Medicine**

**Theme** : **Capacity Building for Medical College Faculties in Maternal, Neonatal, Child Health & Nutrition (MNCHN) Research**  
**Date** : 20 - 24 Sep 2016  
**Organizing Secretary** : Dr BS Garg  
**Delegates** : 16  
**Resource persons** : Dr Garg BS, Dr Doke PP, Dr Keshri V, Dr Shivkumar PV, Dr Gupta SS, Dr Deshmukh PR, Dr Jain S, Dr Jain M, Dr Maliye CH, Dr Bang A, Dr Raut AV  
**Key Topics** : Burden and priorities of MNCHN problems, Protocol development, Logical framework, Ethics in health research, Qualitative methods in health research and budget preparation  
**Funding agency** : ICMR, New Delhi

**Theme** : **Study Design Options in Epidemiological Research**  
**Date** : 12- 16 Jul 2016  
**Organizing Secretary** : Dr BS Garg  
**Delegates** : 24  
**Resource persons** : Dr Garg BS, Dr Gupta SS, Dr Deshmukh PR, Dr Raut AV  
**Key topics** : Cross-sectional study, Case-control study, Cohort study, randomized controlled trial, Diagnostic test and sample size estimation and Introduction to statistical software  
**Funding agency** : ICMR, New Delhi

**Theme** : **Qualitative Methods in Health Research**  
**Date** : 26-30 Apr 2016  
**Organizing Secretary** : Dr Garg BS  
**Delegates** : 24  
**Resource persons** : Dr Garg BS, Mr Bahulekar PV, Dr Gupta SS, Dr Maliye CH,  
Dr Raut AV, Mr Yenurkar V, Mrs Kakde A  
**Key topics** : PLA techniques, Focus group discussion, In-depth interview,  
Key informant interview, Anthropac, Atlas ti and sampling  
**Funding agency** : ICMR, New Delhi

**Theme** : **Qualitative Methods in Health Research**  
**Date** : 20-24 Mar 2017  
**Organizing Secretary** : Dr BS Garg  
**Delegates** : 23  
**Resource persons** : Dr Garg BS, Mr Bahulekar PV, Dr Gupta SS, Dr Maliye CH,  
Dr Raut AV, Mr Yenurkar V, Mrs Kakde A  
**Key topics** : PLA techniques, Focus group discussion, In-depth interview, Key  
informant interview, Anthropac, Atlas ti and sampling  
**Funding agency** : ICMR, New Delhi

**Theme** : **Essential National Health Research workshop**  
**Date** : 6 - 7 Aug 2016  
**Organizing Secretary** : Dr AM Mehendale  
**Delegates** : 32 MBBS students (2015 batch)  
**Resource Persons** : Dr Garg BS, Dr Mehendale AM, Dr Gupta SS, Dr Deshmukh PR,  
Dr Dambhare DG, Dr Raut AV, Dr Ambilkar A, Dr Kalantri A  
**Key topics** : Identify a health problem, framing the research question, searching  
the literature, protocol writing, designing data collection tool  
**Funding agency** : Department of Community Medicine

**Theme** : **Faculty symposium on RNTCP**  
**Date** : 29 Mar 2017  
**Organizing Secretary** : Dr AM Mehendale  
**Number of Delegates** : 50  
**Resource Persons** : Dr Mehendale AM, Dr Narang R, Dr Lanjewar A, Dr Ambilkar A  
**Key topics** : RNTCP  
**Funding agency** : NHM, Government of Maharashtra

**Theme** : **Student Seminar on RNTCP**  
**Date** : 24 Mar 2017  
**Organizing Secretary** : Dr AM Mehendale  
**Delegates** : 80  
**Resource persons** : Dr Mehendale AM, Dr Lanjewar A, Dr Ambilkar A  
**Key topics** : RNTCP  
**Funding agency** : NHM, Government of Maharashtra



**Theme** : **Symposium on RNTCP for Students**  
**Date** : 20 Jan 2017  
**Organizing Secretary** : Dr AM Mehendale  
**Delegates** : 65  
**Resource persons** : Dr Mehendale AM, Dr Dawale A, Dr Kalantri A  
**Key topics** : RNTCP  
**Funding agency** : NHM, Government of Maharashtra

**Theme** : **Workshop on RNTCP for Interns**  
**Date** : 4 Mar 2017 (Internship Orientation Programme)  
**Organizing Secretary** : Dr AM Mehendale  
**Number of Delegates** : 100  
**Resource persons** : Dr Mehendale AM, Dr Lanjewar A, Dr Dambhare DG  
**Key topics** : RNTCP  
**Funding agency** : NHM, Government of Maharashtra

### Microbiology

**Theme** : **CME: An Influenza Update**  
**Date** : 16 Apr 2016  
**Organizing Secretary** : Dr VS Deotale  
**Delegates** : 70  
**Key topics** : Clinical presentation and management, Epidemiology and Prophylaxis  
**Resource persons** : Dr Prasad AK, Dr Chavan S, Dr Solanki R  
**Funding agency** : MGIMS Academy of Medical Sciences, Indian Medical Association (IMA), Wardha and Influenza Foundation

**Theme** : **Biomedical Waste Management and Labsafety for Staff Nurse, technicians and attendants**  
**Date** : 10-11 Aug 2016  
**Organizing Secretary** : Dr VS Deotale  
**Delegates** : 150 delegates on 10 Aug and 170 delegates on 11 Aug  
**Key topics** : Hospital infection, Importance of personal protective equipment, Importance of hand hygiene, Spill management, Training on new guidelines of hospital biomedical waste management  
**Resource persons** : Dr Patil S, Dr Maraskolhe DL, Dr Attal R  
**Funding agency** : Labs for Life Project, MOHFW

**Theme** : **15th Dr PRJ Gangadharam Oration Award for 2015**  
**Date** : 3 Sep 2016  
**Organizing Chairperson** : Dr P Narang  
**Organizing Secretary** : Dr VS Deotale  
**Delegates** : 50  
**Awardee** : Dr Digambar Behera, Sr Prof & Head, Dept of Pulmonary Medicine PGI, Chandigarh & Former Director LRS Institute of Tuberculosis & Respiratory Diseases, New Delhi  
**Key topic** : TB Control in India – Where are we?  
**Funding agency** : Kasturba Health Society

## **Microbiology, Biochemistry and Pathology**

**Theme** : **Workshop on Quality Control in Medical Laboratories**  
**Date** : 14-16 Sep 2016  
**Delegates** : 40  
**Key topics** : Quality Control- Overview, Types of quality control, Measures of central tendency, Gaussian measures, Levey Jennings graph, Westgard rules, Error detection, Bias, total allowable error, consensus based metrics SDI and CVI, Inter-laboratory comparison, Process control, Sigma metrics, Lot verification of reagents and calibrators, Planning QC for your lab  
**Resource persons** : Dr George A, Dr Mohan S, Dave M, Upadhyay R, Goswami K, Dr Rawtani J, Rajneesh, Manoj, Dr Shilpa  
**Funding agency** : Labs for Life Project, MOHFW, New Delhi

## **Obstetrics and Gynecology**

**Theme** : **Workshop on The mystery of uterine balloon mechanical pressure to prevent atonic postpartum hemorrhage (PPH)**  
**Date** : 10 Jan 2017  
**Organizing Secretaries** : Dr PV Shivkumar, Dr SA Tayade, Dr S Jain  
**Delegates** : 100  
**Key Topics** : PPH- Public health issue, PPH- Sevagram experience till date, PPH – Still a major cause of maternal mortality and near miss, PPH in private sector: Management issues  
Details of multicentric project on balloon tamponade in PPH, Uterine balloon therapy in Atonic PPH– Why, When and How?  
**Resource persons** : Dr Choksi P, Dr Choksi N

**Theme** : **Guest lecture on Spontaneous Preterm Birth - A UK perspective**  
**Date** : 2 Mar 2017  
**Organizing Secretaries** : Dr PV Shivkumar, Dr SA Tayade, Dr S Jain  
**Delegates** : 58  
**Key Topic** : Spontaneous preterm birth  
**Resource Person** : Dr Tribe R

## **Orthopedics, Anatomy and Radiology**

**Theme** : **Cadaveric Knee Dissection and Arthroscopic Workshop**  
**Date** : 5 Feb 2017  
**Organizing Secretary** : Dr CM Badole  
**Delegates** : 90  
**Resource Persons** : Dr Bagaria V, Dr Parate P, Dr Badole CM, Dr Tayade AT, Dr Shende MR, Dr Tarnekar AM  
**Key Topics** : Anatomy of knee joint, Radiology of knee joint, Surgical approaches of knee, Various knee portals for arthroscopy, Hands on workshop knee model, Cadaveric dissection for understanding knee

## **Orthopedics, Anatomy, Radiology and Anesthesia**

**Theme** : **National CME on Cervical Spine- Live Surgery & Cadaveric Workshop**  
**Date** : 25-26 Mar 2017  
**Organizing Secretary** : Dr CM Badole  
**Delegates** : 151

**Resource persons** : Dr Shrivastava S, Dr Upendra BN, Dr Bhosale S, Dr Mitra S, Dr Iyengar R, Dr Gautam V, Dr Sarkar B, Dr Khandelwal G, Dr Lalrinchhanna, Dr Kulkarni S, Dr Gadegone W, Shende MR, Tarnekar AM, Tidke S, Jain S, Tayde AT

**Key Topics** : Anatomy of cervical spine, anterior cervical spine surgery, posterior spinal surgery, live surgical demonstration on anterior spinal surgery and posterior spinal surgery, airway management of patient cervical spine surgery, anesthesia and perioperative management of patient for cervical spine surgery

**Funding agency** : Kasturba Health Society

#### Ophthalmology

**Theme** : **Diabetic Retinopathy - Reducing blindness from diabetic retinopathy in India in Maharashtra (Wardha District)**

**Date** : 20 Oct 2016

**Organizing Secretary** : Dr S Singh

**Delegates** : 65

**Key Topics** : Magnitude of diabetic blindness in India and need for integration of NCD and NPCB in preventing diabetic blindness, diabetic retinopathy: risk factors, role of physicians, screening for diabetic retinopathy at Kasturba Hospital – pilot study

**Resource persons** : Dr Murthy GVS, Dr Jain J, Dr Shukla AK

**Funding agency** : Queen Elizabeth Diamond Jubilee Trust

#### Pediatrics

**Theme** : **13th Regional workshop on Facility Based Newborn Care (FBNC)**

**Date** : 27 – 30 Jul 2016

**Organizing Secretary** : Dr KY Vilhekar

**Delegates** : 16

**Key topics** : Newborn Resuscitation, Care of a normal newborn, Diagnosis and management of various neonatal emergencies, NICU protocols, Demonstration of equipment and procedures related to NICU

**Resource persons** : All Faculty of Dept of Pediatrics

**Funding agencies** : Ministry of Health and Family Welfare, Government of Maharashtra

**Theme** : **13th Practical Observer Training in FBNC**

**Date** : 1 – 14 Aug 2016

**Organizing Secretary** : Dr KY Vilhekar

**Delegates** : 8

**Key topics** : Training in various procedures, skills and attitude for complete management of newborns in NICU

**Resource persons** : All Faculty of Dept of Pediatrics

**Funding agencies** : Ministry of Health and Family Welfare, Government of Maharashtra

**Theme** : **Intra-collegiate round of 29th Indian Academy of Pediatrics Annual UG Quiz in Pediatrics**

**Date** : 24 Aug 2016

**Organizing Secretary** : Dr KY Vilhekar

**Delegates** : 10

**Key topics** : General pediatrics, systemic pediatrics, genetics, community pediatrics

- Resource persons** : All Faculty of Dept of Pediatrics
- Theme** : **23rd Annual Basic Neonatal Care Workshop**
- Date** : 24 Sep 2016
- Organizing Secretary** : Dr KY Vilhekar
- Delegates** : 100
- Key topics** : Care of normal new born, breastfeeding, care of low weight babies, hypothermia, neonatal sepsis, neonatal jaundice, transport of sick babies, danger signs
- Resource persons** : All Faculty of Dept of Pediatrics
- Theme** : **23rd Annual Neonatal Resuscitation Training Workshop**
- Organizing Secretary** : Dr KY Vilhekar
- Date** : 25 Sep 2016
- Delegates** : 110
- Key topics** : Physiology of asphyxia, initial steps of resuscitation, positive pressure ventilation, chest compression, intubation, medications, resuscitation of preterms, special cases, ethics
- Resource persons** : All Faculty of Dept of Pediatrics
- Theme** : **14th Practical observer training in FBNC**
- Organizing Secretary** : Dr KY Vilhekar
- Date** : 28 Nov – 11 Dec 2016
- Delegates** : 6
- Key topics** : Training in various procedures, skills and attitude for complete management of newborns in NICU
- Resource persons** : All Faculty of Dept of Pediatrics
- Funding agencies** : Ministry of Health and Family Welfare, Government of Maharashtra
- Theme** : **India West Zonal round of 29th Indian Academy of Pediatrics Annual UG Quiz in Pediatrics**
- Date** : 30 Nov 2016
- Organizing Secretary** : Dr KY Vilhekar
- Delegates** : 12
- Key topics** : General pediatrics, systemic pediatrics, genetics, community pediatrics
- Resource persons** : All Faculty of Dept of Pediatrics
- Theme** : **15th Practical Observer Training in FBNC**
- Date** : 25 Feb – 10 Mar 2017
- Organizing Secretary** : Dr KY Vilhekar
- Delegates** : 6
- Key topics** : Training in various procedures, skills and attitude for complete management of newborns in NICU
- Resource persons** : All Faculty of Dept of Pediatrics
- Funding agencies** : Ministry of Health and Family Welfare, Government of Maharashtra

## Radiotherapy

<b>Theme</b>	:	<b>CME on Management of Breast Cancer</b>
<b>Date</b>	:	8 Mar 2017
<b>Organizing Secretary</b>	:	Dr VJ Vyas
<b>Resource persons</b>	:	Dr Parmar V, Dr Bajpai J, Dr Bhattacharya J
<b>Key topics</b>	:	Evolution of surgical management in breast cancer, Chemotherapy management of breast Cancer: where do we stand?, Radiation techniques in breast cancer- Have we made any progress?
<b>Funding agencies</b>	:	Kasturba Breast Cancer Club, Academy of Medical Sciences, Sanjeevani - Life beyond cancer, Dept of Radiotherapy

## Academy of Basic Medical Sciences

<b>Patron</b>	:	Dr K Goswami, Professor, Dept of Biochemistry
<b>Officer In-charge</b>	:	Mr P Bokariya, Assistant Professor, Dept of Anatomy
<b>Teacher Coordinators</b>	:	Dr V Gujar, Dept of Anatomy Dr R Kothari, Dept of Physiology Dr P Waghmare, Dept of Biochemistry
<b>President</b>	:	Mr Sujay Shrivastava
<b>Secretary</b>	:	Ms Shreya Namjoshi

The body of the Academy of Basic Medical Sciences (2016 batch) was constituted in Nov 2016 in the presence of members of the Advisory committee from the departments of Anatomy, Physiology and Biochemistry. All the 100 undergraduate students of 2016 batch were divided into three equal groups and were placed in Anatomy, Physiology and Biochemistry to participate in preliminary rounds. All students presented their seminars using PowerPoint, models and flow charts. Two students chosen from each preliminary round entered the semi-final rounds and finally two students from each department entered the finals. The final round was held in collaboration with the Academy of Medical Sciences. The winners and their topics of presentation were as follows:

<b>First</b>	:	Ms Irfana M	:	Interatrial septal formation and its defects
<b>Second</b>	:	Ms Marina P Johny	:	Diabetes Mellitus
<b>Third</b>	:	Ms Shreya Namjoshi	:	Atherosclerosis

The other finalists were Saahil ML Nongrum, Tanya Jain and Sujay Srivastava. Certificates and prizes were distributed to the winners.

# MGIMS Academy of Medical Sciences

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<b>Chief Patron</b>	:	Shri Dhiru S Mehta, President, KHS
<b>Patrons</b>	:	Dr BS Garg, Secretary, KHS Dr KR Patond, Dean, MGIMS Dr SP Kalantri, MS, Kasturba Hospital
<b>President</b>	:	Dr VJ Vyas
<b>Vice-President</b>	:	Dr Anshu
<b>Secretary</b>	:	Dr R Kothari
<b>Joint Secretary</b>	:	Dr S Pandey
<b>Treasurer</b>	:	Dr V Gujar
<b>Ex officio President</b>	:	Dr PS Nagpure
<b>Ex officio Secretary</b>	:	Dr Praveen Khairkar
<b>Executive members</b>	:	Dr S Singh Dr Sudha Jain Dr J Jain Dr AM Tarnekar Dr Shuchi Jain Dr DD Gosavi Dr P Jategaonkar Dr A Bang Dr A Tembhare Dr A Kalantri
<b>PG representatives</b>	:	Dr S Babhulkar Dr D Malik
<b>UG representatives</b>	:	Shiv Joshi Gauri Patki Vidit Panchal Aneesh Karwande

This year the following activities were organized by the Academy:

8 Apr 2016

**Symposium on Diabetes Mellitus**

**Recent advances in treatment of Diabetes Mellitus**

Dr Piyush Kodgirwar, Resident, Department of Medicine

**Burden of diabetes in India and world and approaches for its prevention**

Dr Pranali Kothekar, Resident, Department of Community Medicine

**Diabetic Foot**

Dr Mekhla, Resident, Department of Surgery

**Diabetic Retinopathy**

Dr Nupur Dahake, Resident, Department of Ophthalmology

8 Apr 2016

**Importance of Sexual History in the Practice of Medicine**

Dr Alberto D Bali, Professor-Emeritus, Florida International University, Director, Miami Center for Obstetrics and Gynecology and Human Sexuality, Florida

13 Apr 2016

**Final oral presentation round of Sushrut awards 2016 for the best PG thesis project**

1. Dr Urvashi Jain: Predictors of mortality and 30 day disability in patient admitted with acute incident stroke (Medicine)
2. Dr Shabana Ahmed: Utility of p16INK4a staining on cell blocks prepared from residual liquid-based cervicovaginal material (Pathology)- presented by Dr SS Bandyopadhyay
3. Dr Shweta Singh: Endothelial cell loss measured by specular microscopy in patients undergoing cataract surgery - a comparative study between manual small incision cataract surgery and phacoemulsification. (Ophthalmology)
4. Dr Gunjan Dalal: Diagnostic accuracy of serum adenosine deaminase in detecting pulmonary tuberculosis. (Medicine)
5. Dr Abhijeet Golhar: Awareness and health care seeking behavior for newborn danger signs among mothers in rural area of a district in Maharashtra. (Medicine)
6. Dr Swati Jarole: Assessment of effect of early childhood development interventions on child feeding practices including responsive feeding and nutrition status of 6 to 35 months old children. (Community Medicine)

The winner was Dr Urvashi Jain and the runner-up was Dr Gunjan Dalal

16 Apr 2016

**An Update on Influenza**

**Introduction to the theme of update**

Dr P Narang, Director-Professor, Dept. of Microbiology

**Keynote Address by Chief Guest**

Dr Anil K Prasad, Chairman, Influenza Foundation of India, HOD, Respiratory Virology, V. Patel Chest Institute, Delhi

**Clinical Presentation and Management**

Dr Shantanu Chavan, Secretary, Indian Medical Association, Wardha

**Laboratory Diagnosis**

Dr P Narang, Director-Professor, Dept. of Microbiology

**Epidemiology and Prophylaxis**

Dr Ranjan Choudhari, Assistant Professor Dept. of Community Medicine

20 Apr 2016

**Dr Sushila Nayar Memorial Award for UG Research 2016**

1. Akshay Yadav: Tinea capitis among primary school children: A clinicomycological study in a rural hospital in central India
2. Anagha Potharkar: Microbiological profile of ventilator associated pneumonia in the intensive care units in a tertiary care hospital in central India
3. Chetna Periwal: Assessment of visual evoked potentials during pregnancy - a normative study

4. Kehkashan Sidiqqi: Comparison of demographic and clinical features in Japanese Encephalitis (JE) and Non-JE cases of Acute Encephalitis Syndrome (AES) among children in a rural hospital in Wardha district
5. Prathamesh Pathrikar: Comparison of Universal Sample Processing (USP) method and the N-acetyl- L-cysteine (NALC) method for the diagnosis of tuberculosis
6. Shiva Manwatkar: Patient delay among women with breast cancer in rural India
7. Shreya Rasanias: Self-medication among medical and para-medical students
8. Shruti Pansare: Impact of pre-operative education on post-operative recovery in patients undergoing elective Hysterectomy
9. Srushti Jadhav: Exploring association between household complementary feeding initiation practices and feeding behaviour in children 24-36 months-a case control study
10. Sahitya Rao: Study for exploration of efficacy of piperidine derivatives against *Brugia malayi*, by in vitro and bioinformatics study as a valid anti-filarial candidate

The winner of the award was Prathamesh Pathrikar and the runner-up was Shiva Manwatkar. In addition, Ms Sahitya Rao was conferred an award equivalent to first award in recognition of her research paper being selected for presentation at state level under MUHS' Aavishkar initiative.

8 Jun 2016

**Awareness about Alcohol and Tobacco Addiction**

White Coat Army constituted by MBBS students of MGIMS

21 Sep 2016

**Polio Eradication and Acute Flaccid paralysis**

Dr SR Thosar, Surveillance Medical Officer, National Polio Surveillance Project, Akola

**Routine Immunization**

Dr Raj Gahlot, District Reproductive and Child Health Officer, (DRCHO) Wardha

21 Dec 2016

**SLIM21 online catalogue for MGIMS Faculty and students**

Algorhythms Consultant Pvt. Ltd, Pune

8 Feb 2017

**Evolution of Neonatology**

Dr Dhanireddy, Chief, Division of Neonatology, University of Tennessee, Memphis (USA).

1 Mar 2017

**Mending Broken Hearts: The story of pediatric cardiology from one era to the next**

Dr Shashank Behere, Fellow in Pediatric Cardiology, Nemours/Alfred I. duPont Hospital for Children

8 Mar 2017

**Symposium on Management of Breast Cancer**

**Evolution of Surgical Management in Breast Cancer**

Dr Vani Parmar, Professor, Department of Surgical and Breast Oncology, Tata Memorial Hospital, Mumbai



**Chemotherapy management of Breast Cancer: where we stand?**

Dr Jyoti Bajpai, Professor of Medical Oncology, Bone and soft Tissues, Breast, Gynec-Oncology, Tata Memorial Hospital, Mumbai

**Radiation Techniques in Breast Cancer- Do we make any progress?**

Dr Jigna Bhattacharya, Professor, Department of Radiation Oncology Gujarat Cancer Research Institute, Ahmedabad

15 Mar 2017

**Clinical Effectiveness of UpToDate**

Dr I Vinod, Marketing and Training – Lead, Wolters Kluwer India (Health)

22 Mar 2017

**Final presentation round of Academy of Basic Medical Sciences**

1. Sujay Srivastava: Visual Pathway
2. Irfana M: Interatrial septal formation and its defects
3. Marina P Johny: Diabetes mellitus
4. Shreya Namjoshi: Atherosclerosis
5. Tanya Jain: Inguinal hernia
6. Saahil ML Nongrum: Blood transfusion with recent updates

29 Mar 2017

**Final oral presentation round of Sushrut awards 2017 for the best PG thesis project**

1. Dr Snehal Kasare: Current gaps in the management of acute malnutrition among children in Maharashtra - A Qualitative Analysis (Community Medicine)
2. Dr Raviraj Kamble: Assessment of functioning of Village Health Nutrition and Sanitation Committees (VHNSC) in a district in Maharashtra (Community Medicine)
3. Dr Deepika Malik: Comparison of hypofractionated radiotherapy schedule with conventional radiotherapy schedule in chest wall irradiation in post mastectomy breast cancer patients: A prospective randomized study (Radiotherapy)
4. Dr Asmita Meshram: Ventilator associated pneumonia in a medical intensive care unit: incidence, risk factors and mortality (Medicine)
5. Dr Anu Yarky: Diagnostic accuracy of a drop hydrogen peroxide test to differentiate between exudative and transudative pleural effusion (Medicine)
6. Dr Anuj Mundra: Determinants of adverse treatment outcomes of tuberculosis among patients treated under revised national tuberculosis control program in Wardha, Central India: a Case Control study (Community Medicine)

Winner was Dr Deepika Malik and runner-up was Dr Raviraj Kamble

# Medical Education Unit

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The Medical Education Unit was formally started in 1994 as per the MCI guidelines. This unit provides in-house training to faculty, postgraduates, interns and students on various teaching learning modules, research methodology, communication skills, e-learning etc. A Clinical Skills Laboratory has been developed for innovative teaching of clinical skills to students.

## Faculty

Dr KR Patond	:	Dean and Honorary Director
Dr SS Gupta	:	Coordinator
Dr A Gupta	:	Joint Coordinator
Dr MVR Reddy	:	Member
Dr PV Shivkumar	:	Member
Dr S Singh	:	Member
Dr VB Shivkumar	:	Member
Dr Anshu	:	Member
Dr V Deotale	:	Member
Dr SA Tayade	:	Member
Dr K Goswami	:	Member
Dr S Jain	:	Member
Dr CH Maliye	:	Member
Dr AM Tarnekar	:	Member
Dr JE Waghmare	:	Member
Dr R Kothari	:	Member

Several subgroups have been formed to look after specific areas:

### MEU Subgroup on Personal and Professional Development

Dr MVR Reddy, Dr S Singh, Dr A Gupta, Dr Anshu, Dr K Goswami, Dr AM Tarnekar, Dr IL Khandekar, Dr AV Raut, Dr SS Gupta (Coordinator)

### MEU Subgroup for Skills Lab

Dr PV Shivkumar, Dr S Tayade, Dr A Bang, Dr V Jain, Dr V Sharma, Dr D Bhandari, Dr S Rao, Dr V Chauhan, Dr N Bansod, Dr V Shende, Mrs N Walokar, Mrs P Wandile, Mrs JJ Pradhan, Dr Anshu (Coordinator)

### MEU Subgroup for E-learning

Dr Anshu, Dr P Hingorani-Bang, Dr A Bang, Dr A Gupta, Dr S Singh, Dr A Tayade, Dr S Tayade, Dr V Jain, Dr AV Raut, Dr S Jain, Dr JE Waghmare, Dr SS Gupta (Coordinator)

The following faculty members have received or are pursuing fellowships from FAIMER (Foundation for Advancement of International Medical Education and Research) Regional Institutes.

Dr Anshu	:	CMCL-FAIMER Regional Institute 2007, FAIMER Institute Philadelphia 2009
Dr SS Gupta	:	PSG-FAIMER Regional Institute 2007
Dr S Singh	:	GSMC-FAIMER Regional Institute 2007
Dr A Gupta	:	GSMC-FAIMER Regional Institute 2007
Dr K Goswami	:	CMCL-FAIMER Regional Institute 2008
Dr CH Maliye	:	PSG-FAIMER Regional Institute 2010
Dr MVR Reddy	:	GSMC-FAIMER Regional Institute 2011
Dr V Deotale	:	PSG-FAIMER Regional Institute 2013
Dr SA Tayade	:	PSG-FAIMER Regional Institute 2013
Dr Bharati Taksande	:	GSMC-FAIMER Regional Institute 2014
Dr Vishakha Jain	:	GSMC-FAIMER Regional Institute 2017

Dr Anshu has completed her Masters in Health Professions Education from Maastricht University. Dr A Gupta completed her Masters in Health Professions Education from Keele University. Dr Anshu is faculty for GSMC, CMCL, PSG FAIMER regional institutes and for Advanced Workshops conducted by Dept of MET, MUHS, Pune. Dr Smita Singh is faculty and resource person for GSMC-FAIMER Regional Institute, Mumbai.

#### Activities organized

##### **Revised Basic Course Workshop on Medical Education Technology**

<b>Date</b>	:	27-29 Sept 2016
<b>Workshop Coordinator:</b>	:	Dr AM Tarnekar
<b>Resource persons</b>	:	Dr MVR Reddy, Dr PV Shivkumar, Dr S Singh, Dr V Deotale, Dr SS Gupta, Dr A Gupta, Dr Anshu, Dr AT Tayade, Dr SA Tayade, Dr B Taksande, Dr JE Waghmare, Dr J Jain, Dr P Hingorani-Bang, Dr S Rao, Dr S Jain, Dr VB Shivkumar, Dr AM Tarnekar, Dr V Jain, Dr A Tembhare, Dr AV Raut
<b>Number of participants:</b>	:	22
<b>Participants</b>	:	Dr VR Wankhede, Dr BR Sontakke, Dr A Kamble, Dr S Kumar, Dr R Agrawal, Dr A Deshmukh, Dr S Mangam, Dr DC Thamke, Dr CH Maliye, Dr A Kalantri, Dr S Jajoo, Dr A Lanjewar, Dr R Dhakne, Dr S Jategaonkar, Dr P Jategaonkar, Dr V Rathod, Dr N Khadse, Dr A Sahoo, Dr SK Kale, Dr S Patil, Dr R Kothari, Dr S Jain
<b>Key topics</b>	:	Group dynamics, System's approach, Principles of adult learning, Competency-based medical education, Learning domains and progression of learning, Assessment, Choosing learning methods, Interactive teaching methods, Writing lesson plan, Quality assurance, Sensitization to ATCOM, Self-directed learning, Educational networking

**Workshop on 'Developing Good Study Skills' for undergraduate students**

**Date** : 27 Nov 2016  
**Coordinator** : Dr P Hingorani-Bang  
**Resource persons** : Dr Anshu, Dr SS Gupta, Dr S Singh, Dr P Hingorani-Bang, Dr AV Raut, Dr V Jain, Dr R Kothari  
**Key topics** : Habits of successful students, Learning strategies, Understanding how you learn, Time management, How do you read?, Concept maps, Cornell's note taking, Learning clinical skills, Learning together, Best practices in writing answers  
**Number of participants:** 30  
**Name of participants** : A Khan, A Akulwar, A Singh, A Fulzele, A Wankar, A Ramteke, D Dixit, D Lokhande, Hemavaishnave TS, K Palhade, LalithKumar, L Choudhari, M Saini, M Nadagouda, N Arora, N Dutta, P Jain, R Patel, S Hingmire, S Shukla, S Namjoshi, S Chauhan, S Chhazed, S Padole, S Yadav, S Meena, S Chaudhari, U Anwekar, Y Kotla, Y Khalane

**Workshop on 'Developing Good Study Skills' for undergraduate students**

**Date** : 4 Dec 2016  
**Coordinator** : Dr AV Raut  
**Resource persons** : Dr Anshu, Dr SS Gupta, Dr VB Shivkumar, Dr A Gupta, Dr SA Tayade, Dr AV Raut, Dr JE Waghmare  
**Key topics** : Habits of successful students, Learning strategies, Understanding how you learn, Time management, How do you read?, Concept maps, Cornell's note taking, Learning clinical skills, Learning together, Best practices in writing answers  
**Number of participants:** 30  
**Name of participants** : A Shukla, A Roy, A Kokaje, D Pandey, D Mathur, G Sah, Irfana M, K Kinra, Krishnapriya S, Marina P Johny, M Girhepunje, M Dhabaliya, M Dixit, M Krishna, P Pawar, P Kamble, P Gadappa, SL Nongrum, S Chandak, S Kiran, S Goswami, S Bhagat, S Raka, S Kondbattunwar, S Sharma, S Bhusari, T Jain, VenkataSainath K, V Maheshwari, V Chaudhari

# Research Methodology Workshops

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## Basic Workshop in 'Research Methodology' for postgraduate students

<b>Date</b>	:	29 -27 Aug 2016
<b>Coordinator</b>	:	Dr SS Gupta
<b>Resource persons</b>	:	Dr BS Garg, Dr MVR Reddy, Dr PV Shivkumar, Dr SS Gupta, Dr PR Deshmukh, Dr BK Mehra, Dr K Goswami, Dr CH Maliye, Dr S Jain, Mr MS Bharambe, Dr AV Raut, Dr A Kalantri, Dr A Ambilkar
<b>Key topics</b>	:	Introduction to Research Methodology, How to write good research questions, Study designs, Qualitative Research Methods, Literature search, Data presentation, Sampling: methods and sample size, Computer assistance in data entry, Inferential statistics, Evaluation of a diagnostic test, Critical evaluation of a journal article, Ethical issues in medical research
<b>Participants</b>	:	26
<b>Name of participants</b>	:	Dr P Jadhao, Dr P Salunkhe, Dr G Gupta, Dr P Garkal, Dr S Verma, Dr PU Date, Dr S Roy, Dr S Nagalwade, Dr P Shirbhate, Dr T Gorte, Dr N Dodake, Dr S Kumar, Dr R Verma, Dr DD Kynjing, Dr N Singh, Dr A Dhattrak, Dr P Ture, Dr R Solankey, Dr P Wandile, Dr V Rathod, Dr P Kakade, Dr A Futane, Dr A Aswar, Dr J Bagadiya, Dr SA Giri, Dr SK Singh

## Basic Workshop in 'Research Methodology' for postgraduate students

<b>Date</b>	:	29 Aug -03 Sep 2016
<b>Coordinator</b>	:	Dr SS Gupta
<b>Resource persons</b>	:	Dr BS Garg, Dr MVR Reddy, Dr PV Shivkumar, Dr SS Gupta, Dr PR Deshmukh, Dr Anshu, Dr R Narang, Dr B Mehra, Dr P Khairkar, Dr CH Maliye, Dr A Bang, Dr V Jain, Mr MS Bharambe, Dr AV Raut, Dr A Kalantri, Dr A Ambilkar
<b>Key topics</b>	:	Introduction to Research Methodology, How to write good research questions, Study designs, Qualitative Research Methods, Literature search, Data presentation, Sampling: methods and sample size, Computer assistance in data entry, Inferential statistics, Evaluation of a diagnostic test, Critical evaluation of a journal article, Ethical issues in medical research
<b>Participants</b>	:	22
<b>Name of participants</b>	:	Dr SK Nanotkar, Dr P Yelne, Dr M Bhagat, Dr R Rathod, Dr S Gawai, Dr SH Qazi, Dr K Chaphalkar, Dr VP Joge, Dr A Yadav, Dr LG Rathi, Dr MS Ambade, Dr R Hatwar, Dr M Bhojar, Dr A Khandwe, Dr MC Prabhakar, Dr A Gupta, Dr N Yadav, Dr P Gawai, Dr P Thool, Dr A Vyas, Dr P Kalbande, Dr SEFS Ahmed

## Basic Workshop in 'Research Methodology' for Nursing students and faculty members

<b>Date</b>	:	8–10 Mar 2017
<b>Coordinator</b>	:	Dr SS Gupta
<b>Resource persons</b>	:	Dr SS Gupta, Dr R Narang, Dr K Goswami, Mrs. A Ramesh, Dr A Bang, Mr MS Bharambe, Dr AV Raut, Dr A Kalantri, Dr A Ambilkar, Ms V Sahare, Mr V Gawali
<b>Key topics</b>	:	Introduction to Research Methodology, How to write good research questions, Study designs, Qualitative Research Methods, Literature search, Data presentation, Sampling: methods and sample size, Computer assistance in data entry, Inferential statistics, Evaluation of a diagnostic test, Critical evaluation of a journal article, Ethical issues in medical research
<b>Participants</b>	:	Nursing faculty – 3; Nursing students – 19
<b>Faculty members</b>	:	Mrs V Paswan, Sr B Joseph, Ms AK Vaidya
<b>Students</b>	:	Bhaisare PR, Chakole NP, Chawake AA, Choudhari AD, Dahake SA, Dahare HM, Dandekar GB, Gandhare SB, Ingole KS, Jambhulkar PA, Kadav PS, Khadse AS, Nade VV, Ramteke RP, Reddy PS, Thakre PP, Yesankar RR, Megha AS, Sawarkar SP

KASTURBA HEALTH SOCIETY'S  
MAHATMA GANDHI INSTITUTE OF MEDICAL SCIENCES,  
SEVAGRAM – 442 102, WARDHA, MAHARASHTRA, INDIA



CALENDAR 2016-2017

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## **INTRODUCTION**

### ***Mahatma Gandhi Institute of Medical Sciences, Sevagram***

#### **'A Medical College with a Difference'**

The Mahatma Gandhi Institute of Medical Sciences, Sevagram is India's first rural medical college. Nestled in the karmabhoomi of Mahatma Gandhi, in Sevagram, this Institute was founded by Dr Sushila Nayar in 1969. It is attached to Kasturba Hospital, which has the distinction of being the only hospital in the country which was started by the Father of the Nation himself.

In the spirit of its Founder, the Mahatma Gandhi Institute of Medical Sciences, Sevagram today is committed to the pursuit of professional excellence by evolving an integrated pattern of medical education and it seeks to provide accessible and affordable health care primarily to underprivileged rural communities.

#### **MGIMS : Quality Medical Education**

The institute strives to produce doctors of high clinical competence, professional attitudes and ethical behavior. The Institute believes that Gandhian values and principles are relevant even today and it displays a fierce commitment to advancement of medical education without losing the humane touch.

We, at MGIMS, are conscious of the fact that medical education needs to maintain the right balance in the eternal triangle of 'quality, quantity and equity'. In our perennial quest to attain the perfect blend, we never forget that these three arms are not in conflict, and equity cannot be kept in abeyance. The students at MGIMS are drawn from all parts of the country and come from all kinds of social backgrounds. Every effort is made to acquaint the medical student to the real rural India. Our approach to medical education with the spotlight on rural community oriented education makes our doctors sensitive to the felt needs of the people they would be serving in their future. Our students are expected to adhere to professional norms which include altruism, compassion, empathy, accountability, honesty and integrity.

#### **Unique code of conduct**

The students and staff of the Institute adhere to a unique code of conduct, where they are expected to wear hand-woven khadi, participate in shramdan and attend an all-religion prayer every Friday evening. Non-vegetarian food, alcohol and tobacco are taboo.

Soon after admission to the MBBS course, the students live in Gandhiji's Ashram for 15 days, where they are oriented to Gandhian ideology and learn the Gandhian way of life. Drawn from different geographical and cultural backgrounds of the country, this phase helps them get acquainted with each other and respect mutual differences.

#### **Departments and Disciplines**

The Institute offers degrees and diplomas in 20 postgraduate disciplines, 19 of which are presently recognized by the Medical Council of India and PhDs in Nine departments is recognized by Maharashtra University of Health Sciences, Nashik (MUHS). The Institute follows all the norms laid down by the Medical Council of India and by the affiliating University, Maharashtra University of Health Sciences, Nashik for quality medical education.

However, to achieve its specific objectives, it has made some curricular innovations which are unique and have stood the test of time now for many years.

The Institute boasts of a well equipped library which is a recognized resource library for HELLIS network in Western India. Students have access to computers and internet. Drawn from all parts of India, MGIMS has the services of committed, trained full time teachers and physicians, many of whom have won prestigious National and International awards.

### **Community Orientation and Rural Service**

This institute was established to evolve a pattern of medical education to train doctors with a community focus. During the first year, students adopt families in a nearby village and live with the villagers for a fortnight in their surroundings. Here they survey the villagers, understand their social and health related problems and impart health education. The students are made responsible for the health care of the families allotted to them and they follow them up till the end of their medical training. They develop a bond with the villagers and this experience fills them with compassion and a sense of commitment towards serving poor rural communities.

Since 1991, the Institute has asked all its graduates to serve for two years in rural areas. 75 non-governmental organizations have joined hands with the institute to fulfill this dream. Young graduates are posted at these NGOs and provide services to the needy. This rural service is a mandatory criterion for applying for post-graduation in this Institute.

The Report of the Task Force on Medical Education of the National Rural Health Mission spells out the need to draw upon MGIMS Sevagram's initiatives and experience in curriculum innovation and rural placement of its graduates. It suggests launching a participatory exercise with MGIMS and other like-minded institutions, so that national guidelines can be formulated. Several such visionary and innovative education strategies which started from the Institute have now been adopted by the government.

### **Research**

The focus of the Institute has been on community based medical research. Quality research has been the hallmark of this rural institute and the large number of funded projects awarded to the various departments is ample testimony to the potential of the researchers. We have consistently received funding from the Indian Council of Medical Research, Department of Science and Technology, Department of Biotechnology, WHO, UNICEF, USAID, Fogarty AIDS Research and Training Program, USA, Canadian Institute of Health Research, Population Health Research Institute, Canada, National Institutes of Health (NIH), National Heart Lung Blood Institute (NHLBI) and other such organizations.

Being located in Sevagram has never been a hurdle in acquiring either funds or facilities as the enthusiasm and the dedication of the faculty surpasses all other deterrents. Each year, the large numbers of national and international peer reviewed publications from this Institute provide evidence of excellence in research.

Over the last four decades, the MGIMS faculty has been striving hard to imbibe the philosophy which makes it pursue excellence in academics, healthcare and research, more than mundane needs and money. Today, MGIMS has impressive academic standards and excellent research facilities. In the 46 years of its existence, 2415 doctors have graduated from the hallowed premises of MGIMS. Our alumni, spread far and wide across the globe, continue to bring laurels to their Alma Mater.

## **KASTURBA HOSPITAL**

### **Rural Health Care**

The hospital primarily caters to the rural populace. Almost three-fourths of the patients who visit our hospital come from rural backgrounds. The patient load comes to us not only from Vidarbha in Maharashtra, but also from adjoining parts of Andhra Pradesh, Madhya Pradesh and Chhatisgarh. Kasturba Hospital is a rural institute but it does not lack in any of the modern health care amenities and is able to provide health services at affordable costs. Kasturba Hospital offers the benefits of modern technology with compassionate health care.

The Hospital has state-of-the-art intensive care units in Medicine, Accident & Emergency, Surgery, Obstetrics and Gynecology and Pediatrics which provide excellent critical care. A well equipped hemodialysis unit is available for patients of renal failure. The Sri Satya Sai Accident and Emergency Unit provides succour to patients of trauma. The Institute has the only Blood Component Unit in the district which provides components not only to patients in Kasturba hospital, but also to adjoining private hospitals. Facilities for MRI, CT Scan and Mammography are available. The Institute also has a Linear accelerator, digital subtraction angiography and brachytherapy to its armamentarium, which is used for treatment of cancer patients. A computerized radiotherapy system has also been procured. The Alcohol and Drug De-addiction centre seeks to rehabilitate patients who are addicted to drugs and alcohol. The Pathology, Microbiology and Biochemistry laboratories have in-house facilities to conduct a battery of diagnostic tests. All departments of the hospital are connected by an advanced Hospital Information System. A neurosurgery department has also been started from the year 2009. Joint replacements, spine surgeries are routinely performed.

The Govt. of Maharashtra has initiated Rajiv Gandhi Jeevandayee Arogya Yojana (RGJAY) for improving the access to healthcare for poor patients. This scheme has commenced in Kasturba Hospital since 22nd November 2013.

### **Community Service and Health Care**

The Institute's commitment to the community is well known. Community-based programmes have been consistently implemented to enhance health care services. The Department of Community Medicine has adopted three primary health centres and developed a model of decentralized healthcare delivery at village level through Community-based Organizations and the Panchayati Raj Institutions. It has formed 276 Self-help groups, 12 Kisan Vikas Manch and 90 Kishori Panchayats in the adopted villages. Through innovative strategies, family life education is provided to adolescent girls in all the program villages. The Department of Community Medicine was given the Global Safe Motherhood Award in 2001 by the White Ribbon Alliance for Safe Motherhood and Global Council, USA in recognition of its Suraksha Aichi campaign in nearby villages. WHO has designated the Dr Sushila Nayar School of Public Health at MGIMS as a WHO Collaborating Centre for Research and Training in Community Based Maternal, Newborn and Child Health.

The health insurance scheme of the institute has won several accolades as it seeks to create health consciousness in the community. A villager can insure himself and his family by paying Rs 350 a year and in return he gets 50% subsidy in OPD and indoor bills. In 15, 17755 families (81069 members) around Sevagram volunteered to obtain health insurance from this hospital. Similarly 40 villages were totally insured and 75281 rural people were insured under this scheme. No other medical institution has achieved this kind of coverage so consistently over the years and at so affordable a rate.

### **AWARDS AND RECOGNITION**

The National Rural Health Mission has lauded the 'Positive contribution of MGIMS in maternal health activities conducted in partnership with the Govt. of India'. In 2006, the Institute was awarded the Mahaveer Award for Excellence in the Sphere of Education and Medicine by

the Hon'ble President of India. The Institute was bestowed with the National Award for Innovative Hospital & Health Care Management by the Bombay Management Association in 1990. MGIMS has been included among the top 20 best Medical Colleges of the country by the INDIA TODAY survey in May 2008. A survey conducted by the National Medical Journal of India in 1996 ranked the Institute as second in research in Maharashtra. According to a survey (July 2014) by Outlook magazine, it has been ranked 17th in the list of top 25 medical schools of the country.

**The Institute has been accredited grade A by NAAC in recognition of its academic, research & health care activities.**

Over the last four and half decades, the MGIMS faculty has been striving hard to imbibe the philosophy which makes it pursue excellence in academics, healthcare and research, more than mundane needs and money; and to maintain excellence in quality. Today, MGIMS has impressive academic standards and excellent research facilities. In the 46years of its existence, 2415 doctors have graduated from the hallowed premises of MGIMS. Our alumni, spread far and wide across the globe, continue to bring laurels to their Alma Mater.

Any Institute is recognized not by the pillars of its building, but by its faculty and their achievements. Drawn from all parts of India, MGIMS can boast of eminent full time teachers and physicians, many of whom have won prestigious National and International awards. Five of our faculty have received the Dr. B.C. Roy National award. While our Former Director, Dr. Sushila Nayar, was the recipient of the highest award of Medical Person cum statesman, Ex Deans Dr. J.S. Mathur and Dr. P. Narang received the award in the category of eminent medical teacher, Dr. B.C. Harinath for developing the specialty and Dr. P.B. Behere in the category of 'Socio- Medical Relief'. Three of the teachers, Dr. S. Chhabra, Dr. B.S. Garg and Dr. MVR Reddy have received best teacher awards from Maharashtra University of Health Sciences, Nashik for the years 2006, 2007 and 2011 respectively. Dr. S. Chhabra has also received Distinguished Community Services Award for emergency obstetric care from International Federation of Gynaecology & Obstetrics.

**ADMINISTRATION:**

- Shri D. S. Mehta - President, Kasturba Health Society
- Dr. B.S. Garg - Secretary, Kasturba Health Society
- Dr. K.R. Patond - Dean, Mahatma Gandhi Institute of Medical Sciences
- Dr. S. P. Kalantri - Medical Superintendent, Kasturba Hospital

**Administrative Staff at Dean Office**

- Mrs. Sangeeta Narang - Administrative Officer & Rural posting
- Mrs. Trupti Das - Awards, Scholarship, Fees, Refund, Mentor – Student
- Mrs. Manisha Honale - Personal Section (Teaching) (Posted at secretary office)
- Mrs. Vishawas Ranade - Personal Section (Non-Teaching)
- Mr. M. G. Jose - UG & PG - enrolment & eligibility, Examination Certificates, NOC & clearance, Results, Order of payment for Intern & PG,

Mr. Sandeep	-	UG&PG fee record, Clinical Posting, Anti-ragging work, Issue of Certificate, Interns Stipend, Entry in HIS, Railway Concessions, Filing
Mr. Satish Katarkar	-	UG Admission
Mr. Jayant Jumde	-	Website update, Compilation of Information and Miscellaneous and Admission Cell

## **MGIMS FACULTY :**

Dr. K.R. Patond - Dean

### **ANATOMY**

1	Dr. M. R. Shende	Professor & H.O.D.
2	Dr. Asoke Kumar Pal	Professor (Cytogenetics)
3	Dr. Aditya M. Tarnekar	Professor
4	Dr. J. E .Waghmare	Assoc. Professor
5	Dr. V.R. Wankhede	Assoc. Professor
6.	Mr. Pradeep Bokariya	Asstt. Professor
7.	Dr. Bharat R. Sontakke	Asstt. Professor
8.	Dr. Vijay K. Gujar	Asstt. Professor
9.	Dr. Shweta Talhar	Asstt. Professor

### **PHYSIOLOGY**

1.	Dr. A. R. Choudhary	Professor & H.O.D.
2.	Dr. Shobha Pajai	Assoc. Professor
3.	Dr. Nishant V. Bansod	Assoc. Professor
4.	Dr. Sachin M. Pawar	Assoc. Professor
5.	Ms. Ruchi Kothari	Asstt. Professor
6.	Dr. Vinod Shende	Asstt. Professor

### **BIOCHEMISTRY**

1.	Dr. M.V.R. Reddy	Director Professor & H.O.D.
2.	Dr. Satish Kumar	Professor
3.	Dr. Kalyan Goswami	Professor
7.	Dr. Kanchan Mohod	Assoc. Professor
4.	Dr. Pranita J. Waghmare	Asstt. Professor
5.	Dr. Ashwini Kamble	Asstt. Professor

### **JBTDRC**

1	Dr. B.C. Harinath	Director, JBTDRC & Hon. Professor
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### **FORENSIC MEDICINE**

1.	Dr. B.H. Tirpude	Professor & H.O.D.
2.	Dr. P.N. Murkey	Professor
3.	Dr. I. L. Khandekar	Professor
4.	Dr. P.R. Zopate	Asstt. Professor

## PHARMACOLOGY

1.	Dr. Sushil Kumar Varma	Professor & H.O.D.
2.	Dr. D. D. Gosavi	Professor
3.	Dr. Ranjana Kale	Professor
4.	Dr. Mohan Pethe	Asstt. Professor
5.	Dr. Leena Chimurkar (Madavi)	Asstt. Professor

## PATHOLOGY

1.	Dr. Nitin M. Gangane	Director Professor & H.O.D
2.	Dr. Anupama Gupta	Professor
3.	Dr. V. B. Shivkumar	Professor
4.	Dr. Anshu	Professor
5.	Dr. Manisha Atram	Assoc. Professor
6.	Dr. Pravin S. Chavhan	Asstt. Professor (Boold Bank)
7.	Dr. Mangesh Kohle	Asstt. Professor
8.	Dr. Ritu Agrawal	Asstt. Professor
9.	Dr. Bharat Patil	Asstt. Professor
10.	Dr. Abhay Deshmukh	Asstt. Professor
11.	Dr. Shubhangi Mangam	Asstt. Professor
12.	Dr. Kiran Mehra	Asstt. Lecturer

## MICROBIOLOGY

1.	Dr. (Mrs) P. Narang	Director- Professor
2.	Dr. Vijayashri Deotale	Professor & H.O.D.
3.	Dr. Rahul Narang	Professor
4.	Dr. D. C. Thamke	Assoc. Professor
5.	Dr. Deepashri Maraskolhe	Asstt. Professor
6.	Dr. Ruchita Attal	Asstt. Professor

## COMMUNITY MEDICINE

1.	Dr. B. S. Garg	Director- Professor & Secretary, KHS
2.	Dr. A. M. Mehendale	Director Professor & HOD
3.	Dr. S. S. Gupta	Professor (Social Paediatrics)
4.	Dr. Pradeep Deshmukh	Professor (Epidemiology)
5.	Dr. Chetna Maliye	Professor
6.	Dr. D. G. Dambhare	Assoc. Professor
7.	Dr. Sanam Anwar	Assoc. Professor
8.	Mr. M. S. Bharambhe	Assoc. Professor (Stat. & Demography)
9.	Dr. Abhishek Raut	Assoc. Professor
10.	Dr. Ranjan S. Solanki	Asstt. Professor
11.	Dr. Ashwini Kalantri	Asstt. Professor
12.	Dr. Abhay Ambilkar	Asstt. Professor

## MEDICINE

1.	Dr. O.P. Gupta	Emeritus Professor
2.	Dr. A. P. Jain	Emeritus Professor
3.	Dr. U. N. Jajoo	Director Professor
4.	Dr. S. P. Kalantri	Director Professor & Medical Supdt.
5.	Dr. Jyoti Jain	Professor & HOD
6.	Dr. A. R. Satav	Professor
7.	Dr. Bharti Taksande	Professor
8.	Dr. Amrishi Saxena	Assoc. Professor
9.	Dr. Samir Yelwatkar	Assoc. Professor
10.	Dr. Vishakha Jain	Assoc. Professor
11.	Dr. Sumedh Jajoo	Asstt. Professor

- |     |                       |                  |
|-----|-----------------------|------------------|
| 12. | Dr. Tarun Rao         | Asstt. Professor |
| 13. | Dr. Atul Singh Rajput | Asstt. Professor |
| 14. | Dr. Tejvir Singh      | Asstt. Professor |

### **T.B. & CHEST**

- |    |                   |                     |
|----|-------------------|---------------------|
| 1. | Dr. Ajay Lanjewar | Associate Professor |
|----|-------------------|---------------------|

### **DERMATOLOGY, VENEREOLOGY & LEPROSY**

- |    |                   |                |
|----|-------------------|----------------|
| 1. | Dr. Sumit Kar     | Prof. & H.O.D. |
| 2. | Dr. Sonia P. Jain | Professor      |

### **PSYCHIATRY**

- |    |                         |                     |
|----|-------------------------|---------------------|
| 1. | Dr. Praveen H. Khairkar | Professor & HOD     |
| 2. | Dr. Rakesh Dhakane      | Assistant Professor |

### **PAEDIATRICS**

- |    |                       |                  |
|----|-----------------------|------------------|
| 1. | Dr. K. Y. Vilhekar    | Professor & HOD  |
| 2. | Dr. Manish A. Jain    | Professor        |
| 3. | Dr. Akash Bang        | Professor        |
| 4. | Dr. Varsha H. Chauhan | Assoc. Professor |
| 5. | Dr. Smita Jategaonkar | Assoc. Professor |
| 6. | Dr. Richa Chaudhari   | Asstt. Professor |

### **SURGERY**

- |     |                         |                    |
|-----|-------------------------|--------------------|
| 1.  | Dr. R. Narang           | Emeritus Professor |
| 2.  | Dr. D. O. Gupta         | Professor & HOD    |
| 3.  | Dr. Bhupendra Mehra     | Professor          |
| 4.  | Dr. P. Jategaonkar      | Professor          |
| 5.  | Dr. Siddharth Rao       | Assoc. Professor   |
| 6.  | Dr. Ramesh Kumar Pandey | Assoc. Professor   |
| 7.  | Dr. Anil Akulwar        | Assoc. Professor   |
| 8.  | Dr. Rohit Patil         | Asstt. Professor   |
| 9.  | Dr. Akshay Pednekar     | Asstt. Professor   |
| 10. | Dr. Raju Gore           | Asstt. Professor   |
| 11. | Dr. Vaishali Rathod     | Asstt. Professor   |

### **ORTHOPAEDICS**

- |    |                       |                            |
|----|-----------------------|----------------------------|
| 1. | Dr. K. R. Patond      | Director- Professor & Dean |
| 2. | Dr. C. M. Badole      | Professor & HOD            |
| 3. | Dr. Pramod A. Jain    | Professor                  |
| 4. | Dr. Kiran Wandile     | Assoc. Professor           |
| 5. | Dr. Ulhas Dudhekar    | Asstt. Professor           |
| 6. | Dr. Gajanan Chintawar | Asstt. Professor           |

### **OBST. & GYNAE**

- |     |                       |                     |
|-----|-----------------------|---------------------|
| 1.  | Dr. S. Chhabra        | Director- Professor |
| 2.  | Dr. Poonam Verma      | Professor & HOD     |
| 3.  | Dr. S. A. Tayade      | Professor           |
| 4.  | Dr. Shuchi Jain       | Professor           |
| 5.  | Dr. Pramod Kumar      | Assoc. Professor    |
| 6.  | Dr. Amardeep Tembhare | Assoc. Professor    |
| 7.  | Dr. Sheela Shelke     | Astt. Professor     |
| 8.  | Dr. Manjiri Podder    | Astt. Professor     |
| 9.  | Dr. Manisha Rewatkar  | Astt. Professor     |
| 10. | Dr. Trisha Naik       | Astt. Professor     |

## **E.N.T.**

- |    |                     |                  |
|----|---------------------|------------------|
| 1. | Dr. P.S. Nagpure    | Professor & HOD  |
| 2. | Dr. Manish Puttewar | Professor        |
| 3. | Dr. Deepika Garg    | Assoc. Professor |

## **OPHTHALMOLOGY**

- |    |                       |                             |
|----|-----------------------|-----------------------------|
| 1. | Dr. A. K. Shukla      | Director-Professor & H.O.D. |
| 2. | Dr. Smita Singh       | Professor                   |
| 3. | Dr. Ajab C. Dhabarde  | Assoc. Professor            |
| 4. | Dr. Kavita Satav      | Assoc. Professor            |
| 5. | Dr. Pooja Hingorani   | Assoc. Professor            |
| 6. | Dr. Nitu Khadse       | Asstt. Professor            |
| 7. | Dr. Swapnil Mathurkar | Asstt. Professor            |

## **ANAESTHESIOLOGY**

- |     |                        |                  |
|-----|------------------------|------------------|
| 1.  | Dr. Sucheta S. Tidke   | Professor & HOD  |
| 2.  | Dr. Pradeep Dhande     | Professor        |
| 3.  | Dr. Sudha Jain         | Professor        |
| 4.  | Dr. Ben Hur Premendran | Assoc. Professor |
| 5.  | Dr. Ram Nandan Prasad  | Assoc. Professor |
| 6.  | Dr. Dhiraj Bhandari    | Assoc. Professor |
| 7.  | Dr. Mrunalini Fulzele  | Asstt. Professor |
| 8.  | Dr. Amita Sahoo        | Asstt. Professor |
| 9.  | Dr. Rachana Bagrodia   | Asstt. Professor |
| 10. | Dr. Amol Bele          | Asstt. Professor |

## **RADIODIAGNOSIS**

- |    |                       |                  |
|----|-----------------------|------------------|
| 1. | Dr. A. T. Tayade      | Professor & HOD  |
| 2. | Dr. Sushil Kumar Kale | Professor        |
| 3. | Dr. Saurabh Patil     | Asstt. Professor |

## **RADIOTHERAPY**

- |    |                        |                       |
|----|------------------------|-----------------------|
| 1. | Dr. Virendra Vyas      | Professor & HOD       |
| 2. | Dr. Manish Gupta       | Assoc. Professor      |
| 3. | Dr. Yashwant Pawar     | Asstt. Professor      |
| 4. | Dr. Partha Sen         | Asstt. Professor      |
| 5. | Ms. Bharti Mahindrakar | Lecturer (Biophysics) |

## **DENTISTRY**

- |    |                     |                  |
|----|---------------------|------------------|
| 1. | Dr. Bhaskar K Patle | Professor & HOD  |
| 2. | Dr. Praveen Sanghvi | Assoc. Professor |

## **GAMES & SPORTS**

- |    |                     |                              |
|----|---------------------|------------------------------|
| 1. | Shri Girish Bhoware | Director, Physical Education |
|----|---------------------|------------------------------|



## CENTRAL LIBRARY

1. Timings : Working Days (Mon-Sat) : 9AM – 10PM  
: Sunday & holidays : 10AM - 5PM
2. Free issue of books for one year till exam is over.  
A) For economically poor students  
B) For SC/ST students under students welfare scheme.
3. Issue of books on Library cards: Two books for 15 days
4. Instant Xerox – Service is available in the library @ 75 paisa/page.(10AM-4PM)

### **Library Staff**

1	Officer-in-charge	:	Dr .(Mrs) Smita Shukla
2	Librarian	:	Mr VW Vairagade
3	Assistant Librarians	:	Ms Vaishali Kamble
		:	Ms Mamata Raut

## STUDENTS' COUNCIL

<b>Officer Incharge</b>	: Dr .Satish KUMar
<b>General Secretary</b>	: Mr. Harshal Tayade

<b>Event / Post</b>	<b>Officer I/C</b>	<b>Student I/C</b>
Sports	Dr Manish Jain	Mr Karan Singh
Cultural	Dr A M Tarnekar	Mr Nikhil Dorle
Literary	Dr Anupama Gupta	Ms. Anshika Kulshreshtha
NSS	Dr Chetna Maliye	Mr Manthan Indurwade
Magazine	Dr Sonia Jain	Mr Lalit Chondekar
Research	Dr. B. Mehra	Mr. Harshal Tayade
Ladies representatives		Ms Shruti Pansare, Ms Rutuja Darokar
Class representatives		2015 Ms. Rutuja Bhongle 2014 Ms. Vaisahli Madheriya 2013 Mr. Akshay Yadav 2012 Ms, Stuti Chowdhary 2011 Ms. Poshika Agarwal 2010 Ms Meenal Bhadrige
Co-opted Members		Ms Shruti Pansare, Ms Rutuja Darokar
PTI		Mr GP Bhoware

## **FEES AND SECURITY DEPOSITS (FOR UG'S)**

### **PAYABLE AT THE TIME OF ADMISSION ONLY :**

Admission	Rs 5000
Institute Caution Money	Rs 5000
Library Deposit	Rs 5000
Hostel Caution Money	Rs 5000
Mess Deposit	Rs 5000
Orientation & Social service camp	Rs 5000
University Enrolment and Eligibility	as per university norms
Sports complex Fees	Rs 5000
University E- Suvidha Fee (MKCL)	Rs 50
University Development Fee	Rs 50
Internet Charges	Rs 1000

### **PAYABLE ANNUALLY :**

Development Charges	Rs 5000
Sports, Games and Gymnasium	Rs 1000
Health Insurance	Rs 2500
Students' Council Subscription	Rs 500
Students' Welfare Fund + Aswamedh	Rs 500
Library	Rs 500
College Magazine	Rs 200
National Service Scheme	Rs 200
MUHS Cultural meet (SPANDAN)	Rs 200
MGIMS News Bulletin	Rs 250

### **PAYABLE AT THE BEGINNING OF EACH SEMESTER :**

Tuition & Practical	Rs 32200
Hostel Room Rent	Rs 10000
MESS advance Approx. -	Rs 7680 for Girls Rs 8400 for Boys.
Electricity Charge advance	Rs 3000 for Girls Rs 3600 for Boys.
Hostel - Maintenance including depreciation	Rs 1500

## **AWARDS & PRIZES FOR UG'S**

### **1. Financial Support for paying term fees in special cases.**

- 1.1 Mrs Kamalabai Chandaverker merit cum means scholarship for a girl student of general category for entire period of 4 ½ years.
- 1.2 Dr. P.R.J.Gangadharam Merit Cum Means scholarship to a meritorious and needy student for the entire period of 4 ½ years.
- 1.3 Smt Kamala Desikan memorial scholarship to a meritorious and needy student for entire period of 4 ½ years.
- 1.4 "AIV-Kamala Desikan memorial scholarship to poor and deserving students.

### **2. Prizes awarded for performance in Competitive Entrance Test:**

- 2.1 Shri H. N. Ramachar Silver medal for getting highest marks in P.M.T.

### **3. Awards given for performance in orientation camp.**

- 3.1 Late Shri L. R. Pandit & Smt. Manorama Pandit Award of Rs. 500/- to a student for best performance in the orientation camp.
- 3.2 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> prize for Medical & Nursing students in Sarvodaya Vichar Prarambhik Pariksha conducted by Nai Taleem Samiti during the orientation camp.
- 3.3 Late Shri. B.B.L. Mathur Silver Medal for best essay in Gandhian thought and Philosophy in the orientation camp.

### **4. Awards for performance in first, second and final (Part I & II) Professional University examinations;**

#### **4.1 FIRST PROFESSIONAL:**

##### **4.1.1: First in first Professional**

- V. Tirumala Prasad Silver Medal
- M/s Kothari Book Depot Silver Medal
- Late Shri Kesharao G. Babhulkar cash award Rs 1500.
- Running Trophy instituted by 1974 batch of MGIMS

##### **4.1.2 Second in first Professional**

- MGIMS Bronze Medal.

##### **4.1.3 Anatomy**

- First : MGIMS Silver Medal  
'Dr. Sushila Nayar Smriti Puraskar' cash award Rs 6500/-
- Second : MGIMS Bronze Medal

##### **4.1.4 Physiology**

- First : M/s Instrument & Chemical Pvt. Ltd. Silver Medal
- Second: MGIMS Bronze Medal

##### **4.1.5 Biochemistry**

- First : Shri Bhaskara Chinnaiah Gold Medal
- Second: MGIMS Bronze Medal

## 4.2 SECOND PROFESSIONAL :

### 4.2.1 First in Second Professional :

- Dr. Shaila Savakare Memorial Silver Medal
- Late Shri Kesharao G. Babhulkar cash award Rs 1500
- Running Trophy instituted by 1974 Batch of MGIMS

### 4.2.2 Second in Second Professional:

- Dr. E. M. Hech Bronze Medal

### 4.2.3 Microbiology

- First : MGIMS Silver Medal
- Second: MGIMS Bronze Medal

### 4.2.4 Pharmacology

- First : MGIMS Silver Medal
- Second: M/s I. G. E. Co. Bombay Bronze Medal

### 4.2.5 Forensic Medicine

- First : MGIMS Silver Medal
- Second: MGIMS Bronze Medal

### 4.2.6 Pathology

- First : MGIMS Silver Medal
- Second: M/s Kashinath Navghare Bronze Medal

## 4.3 FINAL PROFESSIONAL (PART-I)

### 4.3.1 First in final Professional (Part -1) :

- MGIMS Silver Medal & Smt. Urmil Vohra cash prize Rs 600/-

### 4.3.2 Second in final Professional (Part -1) :

- MGIMS Bronze Medal

### 4.3.3 Community Medicine

- First : MGIMS Silver Medal  
Dr. Prasad Vidwans Memorial Prize of Rs. 301  
Lalit B. Mahajan Memorial Prize of Rs 101
- Second: M/s Chandak Instruments Corporation Bronze Medal

### 4.3.4 Ophthalmology

- First : Shri Yogendra Pal Silver Medal
- Second: M/s Central Scientific Co. Bronze Medal

### 4.3.5 ENT

- First : Shri V.N. Chaturvedi cash prize Rs 5000/-  
Shri G.S.Kakade Silver Medal
- Second: MGIMS Bronze Medal

#### **4.4 FINAL PROFESSIONAL (PART-II)**

##### **4.4.1 First in final Professional (Part -II)**

- Rajyapal of Gujrat Gold medal for standing first and satisfactory performance throughout the study period.
- Late Shri Keshao Rao G. Babhulkar cash award Rs. 2000
- Dr. Anand Karkhanis Silver Medal

##### **4.4.2 Second in final Professional (Part -II)**

- MGIMS Bronze Medal

##### **4.4.3 Surgery**

- First : Dr V. Sabnis Silver Medal
- Second: M/s Bond & Sons Bronze Medal

##### **4.4.4 Medicine**

- First : Shri L. R. Pandit Gold Medal  
Shri Ramchandra Rao Balkrishnapant  
Deshpande Memorial Silver Medal  
Dr. B. K. Mahajan Silver Medal  
Late Shri Birbal Jain Silver Medal
- Second: MGIMS Bronze Medal

##### **4.4.5 Pediatrics**

- First : Dr. I. D. Singh Silver Medal
- Second: MGIMS Bronze Medal

##### **4.4.6 Midwifery & Gynecology**

- First : Smt. Anjana B. Mahajan Silver Medal
- Second: MGIMS Bronze Medal

##### **4.5 BEST STUDENT**

- Dr. P. R. J. Gangadharam Gold Medal.

##### **4.6 SOCIAL & MOST CHEERFUL STUDENT**

- Dr. M. L. Mehrotra Pure Silver Medal.

## INTERNSHIP

### Rules Governing Internship Training Programme for Final Year pass out MBBS Candidates under the Faculty of Medicine

#### A: OBJECTIVES OF INTERNSHIP TRAINING PROGRAMME:

At the end of training, the Intern shall be able to:

- i) Diagnose clinically common disease, make timely decision for referral to higher level.
- ii) Use discreetly the essential drugs, infusions, blood or its substitutes and laboratory services.
- iii) Manage all type of emergencies medical, surgical, obstetric, neonatal and paediatric.
- iv) Demonstrate skills in monitoring of the National Health Programmes and schemes.
- v) Develop leadership qualities.
- vi) Render services to chronically sick and disabled.
- vii) Render specific services to the cases from the tribal and backward regions of the State.

#### Internship Training Programme applicable to the Students passed final year in Jan 2010 & Onwards

Community Medicine	60 Days
Medicine including 15 days of Psychiatry	60 Days
Surgery including 15 days Anaesthesia	60 Days
Obst./Gynae. Including Family Welfare Planning	60 Days
Paediatrics	30 Days
Orthopaedics including PMR	30 Days
ENT	15 days
Ophthalmology	15 days
Casualty	15 days
Elective posting (1X15 days)	15 days
Internship Orientation Programme	05 days

#### Subjects for Elective posting will be as follows:

- i) Dermatology and Sexually Transmitted Diseases.
- ii) Tuberculosis and Respiratory Diseases.
- iii) Radio – Diagnosis
- iv) Forensic Medicine
- v) Blood Bank
- vi) Psychiatry

**Note: Structure internship with college assessment at the end of the internship.**

#### B: LEAVE FOR INTERNS:

- (i) No kind of leave or absence is permitted to an Intern except as may be permitted by the Medical Council of India. Total number of leave will be maximum 12 days per year
- (ii) They cannot take more than 6 days leave at a time.

#### C: LOG BOOK:

It shall be compulsory for an Intern to maintain the record of procedures done/assisted/observed by him/her on day-to-day basis in a prescribed log-book. Failure to produce log-book, complete in all respects duly certified by the concerned authority to the Dean/Principal at the end of Internship Training Programme, may result in cancellation of his or her performance in any or all disciplines of Internship Training Programme. The intern shall maintain a record of work, which is to be verified and certified by the medical officer/ Head of the Unit under whom he works.

**D: Satisfactory completion shall be determined on the basis of the following:**

- a. Proficiency of knowledge required for each case Score 0-10
- b. The competency in skills expected to manage each case:
  - I. Competency for performance of self performance
  - II. of having assisted in procedures
  - III. of having observed Score 0-10
- c. Responsibility, punctuality, work up of case, involvement in treatment, follow-up reports Score 0-10
- d. Capacity to work in a team (Behaviour with colleagues, nursing staff and relationship with paramedicals) Score 0-10
- e. Initiative, participation in discussions, research aptitude Score 0-10

Poor / Fair / below average / average / above average / excellent 0 2-3 3-4 5-6 7-8 9-10

The assessment will be done by respective head of unit /medical officer and entered in log book itself at the end of posting.

**E: EVALUATION:**

**Evaluation of Interns for assessing eligibility for issuing Internship Completion Certificate by Heads of the Medical Colleges:**

The evaluation system shall assess the skills of a candidate while performing the minimum number of procedures as enlisted with an objective that successful learning of these procedures by a candidate will enable him to conduct the same in his actual practice.

- ii) The evaluation shall be done on or before the completion of the posting in following disciplines:
  - a. Medicine and Allied Medicine Department
  - b. Surgery and Allied Surgery Department
  - c. Obstetrics & Gynaecology Obst.& Gyn. Department
  - d. Community Medicine Community Medicine Department

Following the evaluation, the concerned Head of the Department will submit the statement of marks obtained by the candidate, to the University and the concerned Head of the Institution, within one week from the date of completion of evaluation with signature of the candidates against the marks obtained. A candidate shall have the right to register his grievance in any aspects of conduct of evaluation/award of marks, separately to the concerned Head of the Department and Head of the Institution, within three days from the date of completion of his evaluation. If a candidate is declared as unsuccessful in any of the disciplines he shall be required to repeat the posting in the respective discipline for a period of 30% of the total number of days/months, prescribed for that discipline in Internship Training/posting.

## **POST GRADUATE**

### **Courses Available:**

#### **Degrees**

Anatomy, Physiology, Biochemistry, Pathology, Microbiology, Pharmacology, Forensic Medicine, Community Medicine, General Medicine, Paediatrics, Psychiatry, General Surgery, Orthopaedics, Ophthalmology, Otorhinolaryngology, Obstetrics & Gynecology, Anaesthesiology, Radiodiagnosis, Radiotherapy & Skin & V.D.

#### **Diplomas**

D.P.M., D.C.H., D. Ortho, D.O.M.S., D.L.O., D.G.O., D.M.R.D., D.A.,D.D.V.L.

All above courses are recognized by MCI. The total number of seats available for admission will be determined in accordance with the Medical Council of India regulations

#### **Ph.D.**

Anatomy, Physiology, Biochemistry, Pathology, Microbiology, Pharmacology, Community Medicine, Orthopaedics, Obst. & Gynae.

### **Courses duration & Training:**

1. It will be a three years residency system for degree course and two years for Diploma Course (as per MCI rules). Degree course after Diploma will also be for two years.
2. The period of training as a post graduate student will be a full time assignment & the candidate shall put in regular attendance for the period prescribed by Mahatma Gandhi Institute of Medical Sciences to the entire satisfaction of his/her guide & Head of the Department.  
It is mandatory to all Post Graduate students to attend minimum 80% of training during each year starting from 1st May to 30th April. Any candidate who fails to fulfill said criteria, term of such candidates shall be extended till such time, said candidate fulfills 80 % attendance during a year as specified above.
3. In case students' term is extended they will have to complete the extended term with required attendance. However, stipend will be paid for only 37 months in case of Degree and 25 months in case of diploma.
4. Every Candidate who joins M.D. /M.S. course is required to submit a plan of thesis approved by the Institutes Ethics Committee within 6 months. Of his /her joining the course or by last date prescribed by MUHS, Nashik, whichever is earlier. He /she is required to submit the final thesis after completion of 2 ½ year of his/her joining the course or as per the requirement of the University.
5. The candidate will be eligible to take the M.D. /M.S. final examination only after approval of his/her thesis.
6. All candidate are required to put in 6 complete terms of training in the concerned department after registration for degree & 4 terms in diploma course.
7. All the students admitted to the post graduate course shall maintain a log book which is mandatory as per the affiliating university, MUHS, Nashik. The aim of log-book is to evaluate the training program on a day to day basis so as to ascertain the eligibility of the the candidate to appear for the final university examination for the degree/diploma. Following are the objectives of maintaining of the log book:
  1. To help the resident to maintain the day to day records of work done by him/her.
  2. To enable the faculty to have first hand information about the work done by the resident & suggest improvement for better performance .
  3. To confirm the participation in post graduate training activities like ward rounds , presentation of scientific article at journal club, case clinics, post graduate seminars, clinical symposia & book reviews .
  4. Assessing the skills acquired by residents in patients care, teaching & research.
  5. To confirm level & degree of participation in research activities.



### **Leave Rule for P.G.**

The registered P.G. Students can avail leave as follows:

1. Those registered for P.G. Degree/diploma courses can avail 15 days Earned leave and 15 days casual leave for each year starting from 1st May to 30th April. Casual leave can not be carried over from one year(as specified above) to another year. However earned leave can be carried over but can not be encashed by taking accumulated earned leave at the end of PG course as preparatory leave.
2. Thus a candidate registered for PG degree can avail a total of 90 days leave during the three years course, whereas the candidate registered for PG diploma course can avail a total of 60 days leave during entire course of two years. This leave has to be availed within the prescribed duration of the PG course i.e. up to the 30th April of the last years of the course. It can not be carried over after that .Any candidate who avails leave more than that specified above, the total tenure will be extended by one or more terms as the case may be.
3. Normally Casual leave for more than 3 days at a time will not be sanctioned.
4. There is no provision of sick leave, maternity leave and preparation leave (before examination).

### **FEES AND SECURITY DEPOSITS**

#### **For PG Courses:**

14.1.	<b>PAYABLE AT THE TIME OF ADMISSION ONLY:</b>	
	Admission Fee	Rs. 5,000
	Institute Caution Money	Rs. 5,000
	Library Deposit	Rs. 5,000
	Hostel Caution Money	Rs. 5,000
	Mess Deposit	Rs. 5,000
	MGIMS News Bulletin	Rs. 100
	Medical Checkup fees	Rs. 500
	University Development Fee	Rs. 50
	University Enrolment and Eligibility	As per university norms
	University MKCL Fee	Rs. 50
	Internet Charges	Rs. 1,000
14.2.	<b>PAYABLE ANNUALLY:</b>	
	Yearly Development charges (Part of tuition fee)	Rs. 5,000
	Sports, Games and Gymnasium	Rs. 1,000
	Students' Welfare Fund	Rs. 1,000
	Library	Rs. 500
	College Magazine	Rs. 200
14.3.	<b>PAYABLE AT THE BEGINNING OF EACH SIX MONTHLY SEMESTER :</b>	
	Tuition Fees	Rs. 32,200
	Hostel Room Rent	Rs. 12,000
	Mess advance Approx.	Rs. 7,680 for Girls Rs. 8,400 for Boys.
	Electricity charge advance	Rs. 3,600 for Boys Rs. 3,000 for Girls
	Hostel - Maintenance including Depreciation	Rs. 1,500

## **AWARDS & PRIZES**

### **P.G.Students**

1. Shri Sumat Prasad Parmeshwari Das Jain Memorial Silver Medal for topping the merit list for the selection of postgraduate students among the regular batch for the year under consideration.
2. Sagar Gupta memorial Award of Rs.10,000/- (Rupees Ten Thousand) for topping the merit list among the students admitted for postgraduate course in Surgery for the year under consideration.
3. Sh. Kulbhushan and Urmil Vohra cash award for standing second in the merit list among the students admitted for postgraduate course in Surgery for the year under consideration.
4. Smt Urmil Vohra Silver medal and cash award for the P.G. Student who tops the merit list among the Students admitted for Postgraduate course in department of Medicine for the year under consideration.
5. Shri Gulpur Narsimha Pai and Shri Mohan Chandra Pant Memorial Silver Medal and cash prize of Rs.3000 to the author of the best post graduate thesis in the Department of Medicine.
6. Dr. B.C. Harinath & Mrs. Vimala Harinath gold medal and cash award for Best Published Research Paper.

### **INSTITUTIONAL RESEARCH, ETHICS & ANIMAL ETHICS COMMITTEE**

The protocol for PG & Ph.D registration should be approved by institutional research committee & institutional ethics committee / institutional animal ethics committee before submission to the Maharashtra University of Health Sciences.

## **ACADEMIC CALENDER**

<b>AUGUST 2016</b>		
DATE	DAY	ACTIVITIES
1	Mon	Breast Feeding Week
2	Tues	
3	Wed	
4	Thurs	
5	Fri	
6	Sat	
7	Sunday	
8	Mon	2nd Terminal Examination of Final MBBS Regular Batch.
9	Tues	
10	Wed	
11	Thurs	
12	Fri	
13	Sat	
14	Sunday	
15	Mon	Independence Day
16	Tues	
17	Wed	Parasi New Year/ Pateti
18	Thurs	Rakshabandhan
19	Fri	
20	Sat	
21	Sunday	
22	Mon	
23	Tues	
24	Wed.	
25	Thurs	Krishna Janashtami
26	Fri	
27	Sat	
28	Sun	
29	Mon	
30	Tues	
31	Wed.	Pola
<b>SEPTEMBER 2016</b>		
DATE	DAY	ACTIVITIES
1	Thurs	
2	Fri	
3	Sat	
4	Sunday	
5	Mon	Ganesh Chaturthi
6	Tues	
7	Wed	
8	Thurs	
9	Fri	
10	Sat	
11	Sunday	
12	Mon	Foundation Day Celebration & Bakari Id
13	Tues	
14	Wed	Onam
15	Thurs	
16	Fri	
17	Sat	
18	Sunday	

19	Mon	
20	Tues	
21	Wed.	
22	Thurs	
23	Fri	
24	Sat	
25	Sunday	
26	Mon	
27	Tues	
28	Wed.	
29	Thurs	
30	Fri	

**OCTOBER 2016**

DATE	DAY	ACTIVITIES	
1	Sat		Pre university Exam for 2nd ,3rd & Final MBBS Regular Batch.
2	Sunday	Mahatma Gandhi Jayanti & International Non Violence Day celebration	
3	Mon		
4	Tues		
5	Wed		
6	Thurs		
7	Fri		
8	Sat		
9	Sunday		
10	Mon		
11	Tues	Dassera	
12	Wed	Moharam	
13	Thurs		
14	Fri		
15	Sat		
16	Sunday	World Anesthesia Day Celebration	
17	Mon		
18	Tues		Social Service Camp for 15 days for 1st Year Students at Adopted village.
19	Wed.		
20	Thurs		
21	Fri		
22	Sat		
23	Sunday		
24	Mon		
25	Tues		
26	Wed		
27	Thurs		
28	Fri		
29	Sat		
30	Sunday	Laxmi Pujan	
31	Mon		

**NOVEMBER 2016**

DATE	DAY	ACTIVITIES
1	Tues	Bhai Duj
2	Wed	
3	Thurs	
4	Fri	
5	Sat	
6	Sunday	

7	Mon	
8	Tues	
9	Wed	
10	Thurs	
11	Fri	
12	Sat	
13	Sunday	
14	Mon	Guru Nanak Jayanti
15	Tues	MUHS Examination for UG & PG Students  Term Exam of Final MBBS Referred Batch
16	Wed.	
17	Thurs	
18	Fri	
19	Sat	
20	Sunday	
21	Mon	
22	Tues	
23	Wed	
24	Thurs	
25	Fri	
26	Sat	
27	Sunday	
28	Mon	
29	Tues	
30	Wed	

**DECEMBER 2016**

DATE	DAY	ACTIVITIES
1	Thurs	AIDS Week
2	Fri	
3	Sat	
4	Sunday	
5	Mon	
6	Tues	
7	Wed	
8	Thurs	
9	Fri	
10	Sat	
11	Sunday	
12	Mon	Id E Milad
13	Tues	
14	Wed.	
15	Thurs	
16	Fri	
17	Sat	
18	Sunday	
19	Mon	
20	Tues	
21	Wed	
22	Thurs	
23	Fri	
24	Sat	
25	Sunday	Christmas
26	Mon	Dr. Sushila Nayar Jayanti
27	Tues	-ROME Camp after 2nd MBBS University Practical Examination at RHTC,Bhidi - Dr.PRJ Gangadharam
28	Wed	
29	Thurs	

30	Fri		Endowment Oration Award.
31	Sat		-Alumni Meet 1990 Batch
<b>JANUARY 2017</b>			
DATE	DAY	ACTIVITIES	
1	Sunday		Term Exam of First MBBS Regular Batch (Last Week December or First Week January)
2	Mon		
3	Tues	Dr.Sushila Nayar Memorial Voluntary Blood Donation Camp	
4	Wed		
5	Thurs	Guru Govind Singh Jayanti	
6	Fri		
7	Sat		
8	Sunday		
9	Mon		
10	Tues		
11	Wed.		
12	Thurs		
13	Fri		
14	Sat	Makar Sankranti / Pongal	
15	Sunday		
16	Mon		
17	Tues		
18	Wed		
19	Thurs		
20	Fri		
21	Sat		
22	Sunday		
23	Mon		
24	Tues		
25	Wed		
26	Thurs	Republic Day	
27	Fri		
28	Sat		UG Medical Students Regional Research Conference
29	Sunday		
30	Mon		
31	Tues		
<b>FEBRUARY 2017</b>			
DATE	DAY	ACTIVITIES	
1	Wed	Vasnat Panchami	-Literary Day
2	Thurs		-Annual Sports Day
3	Fri		
4	Sat		-Taradevi Memorial Intercollegiate Debate Competition.
5	Sunday		
6	Mon		
7	Tues		
8	Wed.		
9	Thurs		
10	Fri		
11	Sat		
12	Sunday		
13	Mon		
14	Tues		
15	Wed		
16	Thurs		

17	Fri	
18	Sat	
19	Sunday	Shivaji Jayanti
20	Mon	
21	Tues	
22	Wed	Mother Day
23	Thurs	
24	Fri	Mahashivratri
25	Sat	
26	Sunday	
27	Mon	
28	Tues	

**MARCH 2017**

DATE	DAY	ACTIVITIES
1	Wed	
2	Thurs	
3	Fri	
4	Sat	
5	Sunday	
6	Mon	
7	Tues	
8	Wed.	
9	Thurs	
10	Fri	
11	Sat	
12	Sunday	
13	Mon	Holi
14	Tues	
15	Wed	
16	Thurs	
17	Fri	
18	Sat	
19	Sunday	
20	Mon	Parsi New Year
21	Tues	
22	Wed	
23	Thurs	
24	Fri	World TB Day
25	Sat	
26	Sunday	
27	Mon	
28	Tues	
29	Wed	Jhulelal Jayanti
30	Thurs	
31	Fri	

**APRIL 2017**

DATE	DAY	ACTIVITIES
1	Sat	
2	Sunday	
3	Mon	
4	Tues	
5	Wed.	Rama Navami
6	Thurs	
7	Fri	WHO Day Celebration

Pre University Exam for first

8	Sat		MBBS Regular & 2nd,3rd & Final MBBS Referred Batches
9	Sunday		
10	Mon		
11	Tues		
12	Wed		
13	Thurs	Baisakhi	
14	Fri	Dr.Ambedkar Jayanti	
15	Sat	Ramnavmi	
16	Sunday		
17	Mon	MBBS UG Entrance Test, MGIMS - PMT 2016	
18	Tues		
19	Wed		
20	Thurs	Mahavir Jayanti	
21	Fri		
22	Sat		
23	Sunday		
24	Mon		
25	Tues		
26	Wed		
27	Thurs		
28	Fri		
29	Sat		
30	Sunday		

**MAY 2017**

DATE	DAY	ACTIVITIES	
1	Mon		
2	Tues		
3	Wed.		
4	Thurs		
5	Fri	PG Exam MUHS Theory (Tentative dates)	
6	Sat		
7	Sunday		
8	Mon		
9	Tues		
10	Wed		
11	Thurs		
12	Fri		
13	Sat		
14	Sunday		
15	Mon		
16	Tues		
17	Wed		
18	Thurs		
19	Fri	UG Exam Theory Begins For 1st MBBS(Tentative Dates)	
20	Sat	SUMMER VACATIONS FOR MBBS STUDENTS (Tentative Dates)	
21	Sunday		Buddha Purnima
22	Mon		
23	Tues		
24	Wed		
25	Thurs		
26	Fri		
27	Sat		
28	Sun		
29	Mon		
30	Tues		



31	Wed.		
<b>JUNE 2017</b>			Thurs
DATE	DAY	ACTIVITIES	
1	Thurs		
2	Fri		
3	Sat		
4	Sunday		
5	Mon		
6	Tues		PMT Entrance Result for MBBS Students (Tentative Dates)
7	Wed		
8	Thurs		
9	Fri		
10	Sat		
11	Sunday		
12	Mon		
13	Tues		
14	Wed		
15	Thurs		
16	Fri		
17	Sat		
18	Sunday		
19	Mon		
20	Tues		
21	Wed		
22	Thurs		
23	Fri		
24	Sat		
25	Sunday		
26	Mon		
27	Tues		
28	Wed		
29	Thurs		
30	Fri		
<b>JULY 2017</b>			
DATE	DAY	ACTIVITIES	
1	Sat		
2	Sunday		
3	Mon		
4	Tues		
5	Wed		
6	Thurs		
7	Fri		
8	Sat	Ramjan Id	
9	Sunday		
10	Mon		
11	Tues		2nd Term Exam of 2nd & 3rd MBBS Regular Batch
12	Wed		
13	Thurs		
14	Fri		
15	Sat		
16	Sunday		
17	Mon		
18	Tues		-Orientation Camp & Classes Starts for 2016 Batch of MBBS Students
19	Wed		
20	Thurs		

21	Fri		-Orientation programme for the new Post Graduate Students.
22	Sat		
23	Sunday		
24	Mon		
25	Tues		
26	Wed.		
27	Thurs		
28	Fri		
29	Sat		
30	Sunday		
31	Mon		

**CLINICAL POSTING OF 2015 BATCH W.E.F. 23/07/2016**

1st Posting

Dates	Medicine	Surgery	OBGY	Comm. Med.
23/07/2016 – 12/08/2016	A	B	C	D
13/08/2016 – 02/09/2016	D	A	B	C
03/09/2016 – 23/09/2016	C	D	A	B
24/09/2016 – 14/10/2016	B	C	D	A

**CLINICAL POSTING FOR 2014 (REG) BATCH**

(w.e.f. 27/08/2016)

Date	Medicine	Surgery	Obst. & Gynae	Paed
27/08/2016 – 14/09/2016	A	B	C	D
15/09/2016 – 30/09/2016	D	A	B	C
01/10/2016 – 15/10/2016	Prelims examination (IInd MBBS Subjects)			
16/10/2016 – 18/10/2016	D	A	B	C
19/10/2016 – 06/11/2016	C	D	A	B
07/11/2016 – 26/11/2016	B	C	D	A

**Revised CLINICAL POSTING FOR 2013 (REF) BATCH**

(Ref. No. 2632 dated 26/07/2016)

To join back on 04/08/2016 after the last second MBBS University Practical exam

Dates	Eye	Med	Paed	Comm. Med.	ENT	Surg.	Ortho	OBGY
04/08/2016 – 17/08/2016	E	-	-	-	-	-	-	-
18/08/2016 – 31/08/2016	-	E	-	-	-	-	-	-
01/09/2016 – 14/09/2016	-	-	E	-	-	-	-	-
15/09/2016 – 28/09/2016	-	-	-	E	-	-	-	-
29/09/2016 – 12/10/2016	-	-	-	-	E	-	-	-
13/10/2016 – 22/10/2016	-	-	-	-	-	E	-	-
23/10/2016 – 06/11/2016	WINTER VACATION							
07/11/2016 – 10/11/2016	-	-	-	-	-	E	-	-
11/11/2016 – 24/11/2016	-	-	-	-	-	-	E	-
25/11/2016 – 08/12/2016	-	-	-	-	-	-	-	E

IMNCI / IYCF posting – 06/09/2016 to 23/09/2016

**Clinical Posting for 2013 (Reg) Batch**

Date	Eye	ENT	Comm. Medicine
26/08/2016 – 07/09/2016	A	B	C
08/09/2016 – 20/09/2016	C	A	B
21/09/2016 – 02/10/2016	B	C	A

Revision Posting - 14/10/2016 to 26/11/2016

Date	Eye	ENT	Comm. Medicine
14/10/2016 – 27/10/2016	A	B	C
28/10/2016 – 10/11/2016	C	A	B
11/11/2016 – 26/11/2016	B	C	A

Preparatory Leave: - 27/11/2016 to 16/12/2016

University Exam: - 17/12/2016 to 30/12/2016

2012 (REG) BATCH

Prelims Practical examination  
Equally divide 2012 Batch into 4 batches A, B, C & D

Date	Days	Medicine	Surgery	Obst. & Gyane	Paediatrics
01/10/2016	Saturday	A	B	C	D
03/10/2016	Monday	D	A	B	C
04/10/2016	Tuesday	C	D	A	B
05/10/2016	Wednesday	B	C	D	A

Prelims Theory Final MBBS Part – II  
Prelims Time Table {Theory 2-5pm - Exam Hall}

Date	Day	Subject
07/10/2016	Friday	Medicine – I
08/10/2016	Saturday	Medicine – II
10/10/2016	Monday	Surgery – I
12/10/2016	Wednesday	Surgery – II
13/10/2016	Thursday	OBGY – I
14/10/2016	Friday	OBGY – II
15/10/2016	Saturday	Pediatrics

CLINICAL POSTING FOR 2012 (REG) BATCH

Dates	Medicine	Surgery	OBGY	Paediatrics
05/08/2016 – 18/08/2016	C	A	B	-
19/08/2016 – 01/09/2016	A	B	-	C
02/09/2016 – 15/09/2016	B	-	C	A
16/09/2016 – 30/09/2016	-	C	A	B

Prelims Final MBBS Part – II & Practical Examination: 01/10/2016 to 15/10/2016 {Divide into 4 batches A, B, C & D} {Theory 2-5pm-Exam. Hall}

Revision Posting – 16/10/2016 - 26/11/2016

Date	Medicine	Surgery	ObGy	Paediatrics
17/10/2016 – 26/10/2016	A	B	C	-
27/10/2016 – 05/11/2016	B	C	-	A
06/11/2016 – 15/11/2016	C	-	A	B
16/11/2016 - 26/11/2016	-	A	B	C

Preparatory Leave – 27/11/2016 to 16/12/2016

University Exam – 17/12/2016 to 30/12/2016

## Internship Training Programme 2016 (MUHS)

### Internship Posting Schedule for Pediatrics & Orthopedics

Period	Pediatrics	Orthopedics
05/03/2016 to 03/04/2016	EI + EII	EIII + EIV
04/04/2016 to 03/05/2016	EIII + EIV	EI + EII
04/05/2016 to 02/06/2016	FI+ F II	FIII+ F IV
03/06/2016 to 02/07/2016	FIII+ F IV	FI+ F II
03/07/2016 to 01/08/2016	A I+ AII	AIII + AIV
02/08/2016 to 31/08/2016	AIII + AIV	A I+ AII
01/09/2016 to 30/09/2016	B I+ BII	B III+ BIV
01/10/2016 to 30/10/2016	B III+ BIV	B I+ BII
31/10/2016 to 29/11/2016	CI + CII	CIII+ CIV
30/11/2016 to 29/12/2016	CIII+ CIV	CI + CII
30/12/2016 to 28/01/2017	DI + DII	DIII+ D IV
29/01/2017 to 27/02/2017	DIII+ D IV	DI + DII

### Internship Posting Schedule

Period	Medicine	Surgery	Obgy	Comm Med	Paed & Ortho		ENT, Ophthal, Casualty and elective
05/03/2016 to 03/05/2016	A	B	C	D	EI+EII	EIII+EIV	F
04/05/2016 to 02/07/2016	B	C	D	E	FI+FII	FIII+FIV	A
03/07/2016 to 31/08/2016	C	D	E	F	AI+AII	AIII+AIV	B
01/09/2016 to 30/10/2016	D	E	F	A	BI+BII	BIII+BIV	C
31/10/2016 to 29/12/2016	E	F	A	B	CI+CII	CIII+CIV	D
30/12/2016 to 27/02/2017	F	A	B	C	DI+DII	DIII+DIV	E

**TIME TABLE FOR 1<sup>st</sup> MBBS W.E.F. 13<sup>th</sup> September 2016**

Time/Days	9 – 10 AM	10 -11 AM	11 – 12.30 PM	12.30 – 1.30PM	1.30 –2.30 PM	2.30 – 4 PM	4 – 5 pm
<b>MONDAY</b>	Biochemistry	Anatomy	Biochemistry Practical-Batch A/Physiology Practical –Batch B	L U N C H  B R E A K	Physiology	Community Medicine Practical/ Anatomy Dissection	Self directed learning (Anatomy Tutorial / practical)
<b>TUESDAY</b>	Anatomy	Physiology	Physiology Practical –Batch A/Histo-Batch B		Anatomy	Anatomy Dissection	Self directed learning (Anatomy Tutorial / practical)
<b>WEDNESDAY</b>	Biochemistry	Anatomy	Histo Batch A/ Physiology Practical –Batch B		Physiology	Anatomy Dissection	Self directed learning (Physiology Tutorial / practical)
<b>THURSDAY</b>	Anatomy	Physiology	Physiology Practical –Batch A/Biochem Practical-Batch B		Anatomy	Anatomy Dissection	Self directed learning (Biochemistry Tutorial / practical)
<b>FRIDAY</b>	Biochemistry	Anatomy	Anatomy Dissection		Physiology	Community Medicine	Shramdan at 4 PM Prayer 5.00 PM
<b>SATURDAY</b>	Biochemistry	Physiology	Anatomy Dissection		Self directed learning		

Self directed learning hours will be monitored through periodical formative assessment, for giving feedback with focus on slow achievers and for the students seminars

Field visit on the first Saturday of every month after social service camp.



**TIME TABLE FOR 3<sup>rd</sup> SEMESTER W.E.F. 26 July. 2016 ONWARDS**

Time/Days	8 – 9 AM	9 – 10 AM	10 -12 AM Hospital	12 – 1 PM	1 – 2 PM	2 – 3 PM	3 – 4 PM	4 – 5 pm
MONDAY	3rd Surgery - (Physio Lect.Hall)	3rd Microbiology	Clinics	Lunch	3rd A Pathology Pract. 3rd B Micro Pract.		3rd A Micro Pract. 3rd B Patho Pract.	
TUESDAY	3rd Microbiology* (Anatomy Lect. Hall)	3rd Pathology	Clinics	Lunch	3rd A Pharmacology Pract. 3rd B FMT Pract.		3rd A FMT. Pract. 3rd B Pharmacology Pract.	
WEDNESDAY	3rd Pathology* (Anatomy Lect. Hall)	3rd Pharmacology	Clinics	Lunch	3rd A Pharmacology Pract. 3rd B FMT Pract.		3rd Comm Med (Patho Lec. Hall)	Integrated Teaching
THURSDAY	3r Medicine (Physio Lect Hall)	3rd – Pharmacology	Clinics	Lunch	3rd A. Pathology Pract. 3rd B Micro Pract.		3rd A Micro. Practical 3rd B Pathology Practical	
FRIDAY	3rd Surgery (Physio. Lect. Hall)	3rd Pathology	Clinics	Lunch	3rd A FMT Practical 3rd Pharmacology Practical		3rd Micro (Patho Lect Hall)	Shramdan / Comm. Prayer
SATURDAY	3rd Pharma (Physio Lect Hall)	3rd Forensic Med.	Clinics	3rd Comm. Medicine (Patho. lect. Hall)	-		-	

**TIME TABLE FOR 5<sup>TH</sup> SEMESTER W.E.F. 24/6/ 2016 ONWARDS**

Time/Days	8 – 9 AM	9 – 10 AM	10 -12 AM Hospital	12 – 1 PM	1 – 2 PM	2 – 3 PM	3 – 4 PM	4 – 5 pm
MONDAY	5th Pharmacology- (Patho Lect Hall)	5th Microbiology (Patho Lect Hall)	Clinics	Clinics	5th Pharmacology Practical		5th Microbiology	-----
TUESDAY	5th Patho (Path Lect Hall)	5th Pharmacology- (Patho Lect Hall )	Clinics	Clinics	5th Pathology (Patho Lect.Hall)	5th FMT (Patho Lect Hall)	5th Patology Pract.	
WEDNESDAY	5th Pathology (Patho Lect Hall)	5th Pharma (Patho Lect Hall)	Clinics	Clinics	5th Pharmacology (Practical)		5th FMT Lecture	Academic of Medical Sciences Integrated teaching
THURSDAY	5th Microbiology (Patho Lect Hall)	5th – Pharma (Patho Lect Hall)	Clinics	Clinics	5th Microbiology (Practical)		5th FMT Practical	-----
FRIDAY	5th Forensic Med. (Patho Lect Hall)	5th Pathology (Patho Lect Hall)	Clinics	Clinics	5th Patho. Pract.		5th Micro (Patho Lect Hall)	Shramdan / Comm. Prayer
SATURDAY	5th Pharmacology (Patho Lect Hall)	5th Forensic Med. (Patho. Lect. Hall)	Clinics	5th FMT (Practical)	-		-	

TIME TABLE FOR **6TH, 7TH SEMESTER W.E.F. July. -2016 ONWARDS**

Time/ Days	8 – 9 AM	9 – 12 AM	1 – 2 PM	2 – 3 PM	3 – 4 PM	4 – 5 PM
MONDAY	Surgery	Clinics	Orthopaedics	Surgery	Gynaecology Demos.	Ophthalmology
TUESDAY	Medicine	Clinics	Paediatrics	MEDICINE 6 <sup>th</sup> - Dermatology	Ophthalmology	Gynaecology/ (Skill Lab)
WEDNESDAY	Gynaecology	Clinics	Community Med. (DCMLH)	SURGERY (Operative Surgery) (Skill Lab)	Paediatrics (All except 1 <sup>st</sup> Wed. of the month)  Multi/Inter Departmental Lectures  (1 <sup>st</sup> Wednesday of the month)	Academy Meeting
THURSDAY	Medicine	Clinics	6 <sup>th</sup> –Psychiatry	ENT	Orthopaedics	*Comm. Medicine (DCMLH)
FRIDAY	Surgery	Clinics	ENT	Ophthalmology	*Comm. Medicine (DCMLH)	Shramdan & Comm. Prayer
SATURDAY	Gynaecology	Clinics				

**TIME TABLE 8<sup>TH</sup>, & 9<sup>TH</sup> SEMESTER W.E.F. July. 2016**

DAYS	8 – 9 AM	9 – 12 AM	1 – 2 PM	2 – 3 PM	3 – 4 PM	4 – 5 PM
MONDAY	Surgery	Clinics	--	Surgery (Operative)	Orthopaedics	Gynaecology (Demons)
TUESDAY	Medicine	Clinics	--	Medicine (Skill Lab)	Paediatrics	Gynaecology
WEDNESDAY	Gynaecology	Clinics	--	Surgery (Operative)	Paediatrics - (All except 1st Wednesday of the month)  - MULTI/Inter Departmental Lectures (1st Wed. of the Month)	Academy  Meeting
THURSDAY	Medicine	Clinics	Medicine (Psyt Lect. Hall)	Surgery (allied) - Radiology - Anaesthesia - Dentistry	Orthopaedics	Medicine
FRIDAY	Surgery	Clinics	--	--	Surgery (Skill Lab)	Shramdan / Comm. Prayer
SATURDAY	Gynaecology	Clinics	--	--	--	--

## CODE OF CONDUCT

- 1 The general control of students is vested with the Dean.
- 2 Students admitted to MGIMS are expected to Exhibit high standards of academic interest and responsible behavior, befitting professional level of maturity.
- 3 Students admitted to MGIMS are expected to follow the code of conduct as follows
  - i) wearing khadi clothes ii) consume vegetarian meals iii) eschew smoking, drinking and other intoxicants iv) participate in community prayer, shramdan and such other activities as may be prescribed from time to time v) must be free from any prejudice regarding, caste, creed or untouchability vi) girl students must tie their hair and boy students should have tidy hair when at work in the college and hospital.
- 4 Residing in the hostels of the Institute is compulsory for all students.
- 5 Students after admission to the Institute are given an Orientation Training Course for a fortnight in Sevagram Ashram for getting sensitized to Gandhian ideology. If it is found that they are unable to adjust themselves to the environment, their admission may be cancelled.
- 6 Attendance in the Social Service camp, whenever it is held is essential, failing which the student may not be allowed to appear in the University Exam.
- 7 Students who do not maintain a satisfactory standard in academics or in the observance of code of conduct or discipline shall neither be allowed to hold office in extracurricular bodies or be eligible for scholarship or given any other assistance.
- 8 Students should maintain 75% attendance with minimum 80% in practical to be eligible to appear in the university examination.
- 9 Permission must be taken from the Dean for any leave or absence from classes or to go out of station. All students must report to the warden before leaving and on return from leave. In case of illness during leave a medical certificate must be sent immediately.
- 10 All illness should be reported to the Warden at the earliest.
- 11 Students must pay for all damages caused by them to books and property of the Institute.
- 12 Fees shall be paid on the date notified by the Dean's office. Mess fees shall be paid in advance for 6 months with term fee. Balance if any, shall be refunded at the time of leaving.
- 13 **Ragging in any form is absolutely forbidden and as per the provisions of Maharashtra Act XXXIII known as "Maharashtra Prohibition of ragging Act of 1999", students indulging in ragging can be punished under the Act resulting in suspension, and even expulsion from the Institute and imprisonment.**

### **Prevention of Ragging :**

**RAGGING IS A COGNIZABLE OFFENCE AND IS FORBIDDEN IN ANY FORM. ANYONE INDULGING IN RAGGING WILL BE PUNISHED UNDER THE ACT RESULTING IN SUSPENSION, EXPULSION FROM THE INSTITUTE AND IMPRISONMENT. THE PUNISHMENT FOR RAGGING WILL BE MENTIONED IN THE COLLEGE LEAVING CERTIFICATE.**

**The Supreme Court has defined the ragging as under:**

**Clause No.6 : Any disorderly conduct whether by words spoken or written or by an act which has the effect of teasing treating or handling with rudeness any other student, indulging in rowdy or in disciplined activities which cause or are likely to cause annoyance, hardship or psychological harm or to raise fear or apprehension thereof in a fresher or a junior student or asking the students to do any act or perform something which such student will not do in the ordinary course and which has the effect of causing or generating a sense of shame or embarrassment so as to adversely affect the physique or psyche of a fresher or a junior student. The cause of indulging in ragging is deriving a sadistic pleasure or showing off, power, authority or superiority by the seniors over their juniors or fresher.**

#### **Punishable ingredients of Ragging**

- Abetment to ragging
- Criminal conspiracy to rag
- Unlawful assembly and rioting while ragging
- Public nuisance created during ragging
- Violation of decency and morals through ragging
- Injury to body, causing hurt or grievous hurt
- Wrongful restraint
- Wrongful confinement
- Use of criminal force
- Assault as well as sexual offences or even unnatural offences
- Extortion
- Criminal trespass
- Offences against property
- Criminal intimidation
- Attempts to commit any or all of the above mentioned offences against the victim(s)
- Physical or psychological humiliation

#### **Punishments**

Depending upon the nature and gravity of the offence as established by the Anti-Ragging Committee of the institution, the possible punishments for those found guilty of ragging at the institution level shall be any one or any combination of the following:

- Suspension from attending classes and academic privileges.
- Withholding / withdrawing scholarship/ fellowship and other benefits
- Debarring from appearing in any test / examination or other evaluation process.
- Withholding results
- Debarring from representing the institution in any regional, national or international meet, tournament, youth festival, etc.
- Suspension / expulsion from the hostel
- Cancellation of admission.

- Rustication from the institution for period ranging from 1 to 4 semesters
  - Expulsion from the institution and consequent debarring from admission to any other institution for a specific period.
  - Fine of Rs 25,000 to Rs 1 lakh.
  - **Collective Punishment:** When the persons committing or abetting the crime of ragging are not identified, the institution shall resort to collective punishment.
- 14 The candidate after taking admission to this Institute shall have to give an undertaking counter signed by his/her parents that he/she shall not indulge in any activity which amounts to ragging and if he/she is found guilty he/she shall be punished as per the disciplinary rules of Mahatma Gandhi Institute of Medical Sciences, Sevagram.
- 15 Fees shall be paid on the date notified by the Dean's office. After the said date, fees will be acceptable only within a period of one month with a late fee fine as notified. After this period the name of the student will be struck off from the Institute Roll. The student may be readmitted on the payment of Rs **1000** as readmission fee alongwith clearance of all dues.
- 16 Continuous absence from the classes for over one month without any valid reason will make the student liable to be removed from the institute Rolls. He/she may however be readmitted with valid reason on the payment of Rs **1000** as readmission fee in addition to clearing all dues.
- 17 As per MUHS, Nashik every student has to attend a minimum of 80% practical and 75% theory classes to be eligible for appear in University examination.

### **RULES AND REGULATIONS**

Following rules and regulations as amended from time to time, are applicable to all medical students.

#### **1) General Rules:**

1. The general control of students is vested in the Dean.
2. Students admitted to the Institute are expected to:-
  - i. Lead simple life
  - ii. Wear Khadi
  - iii. Take vegetarian meals
  - iv. Eschew smoking, drinking and any other intoxicants.
3. Students after admission to the Institute are given an Orientation Training Course for a fortnight in Sevagram Ashram to introduce them to Gandhian thought and way of life. If they are found unable to adjust themselves to the environment, their admission may be cancelled.
4. During the 1st Semester, attendance in the Social Service Camp is essential, failing which the student may not be allowed to appear in the University Exam.
5. Students who do not maintain a satisfactory standard in academic or in the observance of college code of discipline shall not be allowed to hold office in extracurricular bodies or be eligible for scholarship or any the assistance.

## **2) Rules for class attendance:**

1. Regular and punctual attendance at lectures, demonstration, laboratory work, clinics and class examinations is essential. Students who do not have 75 percent attendance or whose progress and conduct are not satisfactory, may not be allowed to appear at the University Examination.
2. There shall be no condoning for shortage of attendance.
3. All students are required to note that they fulfil the attendance requirements to avoid unpleasantness at the time of registering for the examination.
4. Continuous absence from the classes for over one month with out any valid reason will make the student liable to be removed from the college Rolls. He may however be readmitted on the payment of Rs. 1000/- as readmission fee in addition to clearing all dues.
5. **It has become mandatory to send quarterly attendance to the university after which it will not be possible to change the attendance so students have to ensure that they fulfil the attendance in each quarter. In case their attendance is short it will be informed to their parents.**
6. When the teacher enters the classroom the students should rise and remain standing till they are asked to sit or till teacher sits down. When the attendance is taken by the teacher, each student as his/her name or roll number is called must rise up from his/her seat and answer to his/her name.
7. No student shall be allowed to leave the classroom without the permission of the teacher or until the class is concluded.
8. Students are expected to assemble in the classroom five minutes before the appointed hour when the roll shall be called and the absence of any student noted.
9. Students are not permitted to remain in the lecture hall except during the hours of instruction.

## **3) Dress Rules:**

1. Only khadi clothes are permitted
2. Dress should be neat and clean.
3. Girls with hair longer than shoulder length, should have their hair put up.
4. Aprons are compulsory for boys and girls.
5. Gaudy dresses should not be worn.

## **4) Leave Rules:**

1. Student leaving the hostel on Sundays & Holidays must apply and take permission to do so from hostel authorities and should not proceed on leave till it is sanctioned.
2. The student shall submit application in duplicate to the officers nominated by Dean for permitting the students to go on leave, on working days separately for Preclinical, Paraclinical, Final part I and Final part II. The post graduate students shall take leave sanction from their respective Head of the Departments.



3. The leave will be sanctioned by the respective teachers names of whom will be circulated to the students and the student shall inform the sanction of such leave to the concerned departments.
4. The officers shall also send a copy each of such sanction to the Warden / Lady Hostel Supdt. and student section for record.

5) **Hostel Rules:**

1. Residence in the hostel of the Institute is compulsory for all Under Graduate students.
2. Postgraduate students will be given accommodation in the hostel if the rooms are available and that will be done as per the rules.
3. The rent of the hostel shall be paid in two equal installments as per the prospectus along with term fees.
4. Students on allotment of the rooms will take over the charge of the rooms including the glass-pans, electric installation and the furniture. Any damage or breakage during the occupation period will be charged from the student concerned.
5. A student must hand over the charge before leaving the room with all fitting, fixture and furniture intact to the Warden J.N. Hostel (Boys) / Supdt. Ladies Hostel.
6. Students in their own interest are strictly prohibited from keeping money, jewelary or any other valuables in their rooms. They should also ensure that they lock their rooms while going out as a safety against possible thefts. Hostel authorities will not be held responsible for any loss. A student should report to the hostel authorities immediately for investigation if his/her lock is tempered with or broken or a theft has taken place. No student shall report such matter directly to the police.
7. Keeping unauthorized occupants including friends and relatives in the hostel is not permitted.
8. Student must keep his/her room clean and tidy. He / She must throw hair, papers, fruit-skin or any other kind of refuse articles in the waste paper basket provided for and then should throw in the dustbin provided outside.
9. He / She must remain properly dressed and not commit any nuisance, shouting, and playing of Radios, Gramophones etc. loudly in the room / hostel campus which will be seriously viewed.
10. He /she must not spoil soil or disfigure any part of the building, compound, garden etc.
11. He / she shall leave the bath room and latrine after use as clear as he / she would like to have when he/she visits the place.
12. Wastage of water must be avoided by closing the taps when not in use.
13. Meals are not allowed to be taken in rooms unless a student is ill or it is permitted by the Warden / Supdt. Ladies hostel. **In case of the rule is violated a fine of Rs 100 may be imposed.**
14. Wastage of food must be avoided. Any leftover food on the plate must be thrown in the dustbin before washing his/ her plate by the student. Chocking of wash – basins must be prevented by them.

15. Student must not interfere with any electrical installation in hostel. Use of electric Iron and applications for making tea etc. is permitted in the utility room only. No other electrical appliances are permitted in the Hostel. Students must see that the lights and fans are switched off when the rooms are unoccupied, failing which they will be liable for disciplinary action. Abuse and wasteful use of electric current or unauthorized fitting of any connection will make them liable for penalty and disciplinary action.
16. No male student is allowed in the inside of the Girls Hostel and vice-versa, except on official occasions when mixed gathering are allowed.
17. Guests, friends or relatives of the same sex may be allowed on Sundays and Holidays at specified hours notified by the hostel authorities to visit in the respective hostels. They will not be allowed to do so on working days and during college hours unless specifically permitted by the hostel authorities.
18. No visitors shall stay in the hostel unless they are permitted by the hostel Authorities in writing.
19. No student is allowed to remain absent from the hostel after 10.00 p.m. (Girls) and 10.30 p.m. (Boys) without the permission of hostel authorities.
20. Permission must be taken from teacher In charge authorized for permitting leave of absence from classes or to go out of station. All students must report to the warden on return from leave. In case of illness during leave a medical certificate must be sent immediately.
21. Ragging in any form is absolutely forbidden and is punishable by fine, rustication or expulsion from the Institute.
22. All illness should be reported to the Warden as early as possible.
- 23. Students should ensure that any personal issue of married students (related to wife /husband) or boyfriend/girlfriend should not disturb the tranquillity of the hostel, it should be sorted out at their personal level or by their families.**

#### **6) Disciplinary Rules:**

1. A disciplinary committee of the college will be formed consisting of the faculty Members nominated by Dean
2. This committee shall handle all charges of misconduct against the students.
3. The Committee is empowered to consider all disciplinary charges and to recommend penalties.
4. The Dean shall finally decide the disciplinary action.
5. Any student who disobeys a lawful order given by the Dean, shall be subject to disciplinary action
6. A Student committing any breach of discipline as specified below will render himself / herself liable for disciplinary action :-

#### **MINOR MISCONDUCTS**

- 1) Absence from lectures/clinics/practical/training programmes without any valid reason/permission. Found indulging in ragging of juniors.
- 2) Overstay of sanctioned leave/vacation.
- 3) Any conduct/action due to which the fellow inmates are disturbed.**

- 4) **In spite of repeated instructions if the hostel premises is kept unclean by the inmate**
- 5) Absence from other place/activity officially requiring the presence of the students

#### **MAJOR MISCONDUCTS**

- 6) Absence from hostel, without leave/permission.
- 7) Absence from university exam without any valid reason like sickness/hospitalization etc.
- 8) Prolonged absence from college without permission from college.
- 9) Absence from college exams without valid reason.
- 10) Using unfair means in tests/examinations/practical.
- 11) Use of criminal force to fellow students.
- 12) Neglect of studies and unsatisfactory progress in academics.
- 13) Disobedience of orders and insubordination to teaching staff.
- 14) Grouping under the banner of religious or political outfits should be avoided. Nobody should try to force their belief or habits on other students.
- 15) Violation of standing orders or any other orders of Dean.
- 16) Smoking & Drinking in the college campus is not permitted. Violations of this act shall be cause for discipline.
- 17) Any student, who uses, possesses, consumes, is demonstrably under the influence of, or sells any liquor, in violation of law shall be subject to discipline.
- 18) Any student who, uses, possesses, consumes, is demonstrably under the influence of, or sells any narcotic drug or controlled substance, in violation of law, shall be subject to discipline.
- 19) Any student who significantly disrupts any college function by intentionally engaging in conduct that renders it difficult or impossible to continue such a function in an orderly manner, shall be subject to discipline.
- 20) Any student who, while in any college facility or participating in a college related program, commits theft or possesses stolen property, or commits robbery, shall be subject to discipline.
- 21) Any student who causes or attempts to cause physical damage to property owned, controlled, or operated by MGIMS, or to property owned, controlled, or operated by another person while said property is located on college facilities, shall be subject to discipline.
- 22) Any student who in this or any other manner is guilty of malicious mischief shall be subject to discipline.
- 23) Any student who, while in any college facility or participating in a college related program, shall interfere by force or violence with, or intimidate by threat of force or violence, another person who is in the peaceful discharge or conduct of his/her duties or studies, shall be subject to discipline.
- 24) Any other breach of discipline not mentioned above but contrary to any provision of the Code of Conduct, Dean's order or Notices/Instructions issued from to time.

**7. Penalties and Punishments**

The competent authorities to award penalties/punishments will be as approved by Dean.

**a) Removal from College Rolls**

A student will be removed from the rolls of the College by the appropriate authority on the grounds of :-

1. Unsatisfactory disciplinary conduct.
2. Unsatisfactory progress during training.
3. Absence from college and /or failure to appear in University examinations

**b) Suspension from College**

1. A student may be suspended for a term or more on academic grounds as decided by the College Council.
2. A student may be suspended for a term or more by the college authorities on disciplinary or administrative reasons.
3. On suspension or being struck off college rolls the student will vacate the hostel within 48 hours and proceed directly to the place of residence of his parent (s) or his legal guardian if parents are not alive.
4. The college has no liability, whatsoever, if the student proceeds elsewhere.

**c) Fine**

Fine of Rs 250 can be imposed on minor offenses by the Warden or Head of Department. A fine up to Rs 1000 will be imposed by the Dean.

**d) Publication of Punishment and Penalties**

Major/Serious punishments and penalties will be published in the College notice board.

**8. Undertaking**

All the students will sign the undertaking as given below before occupying the rooms in the hostel.

**“I have read all the rules and I agree to abide by the same and shall be liable for disciplinary action if I violate any of them.”**

-----

**UNDERTAKING**

**I have read all the rules and I agree to abide by the same and shall be liable for disciplinary action if I violate any of them.**

**Place : Sevagram**

**Signature of the candidate**

**Date:**

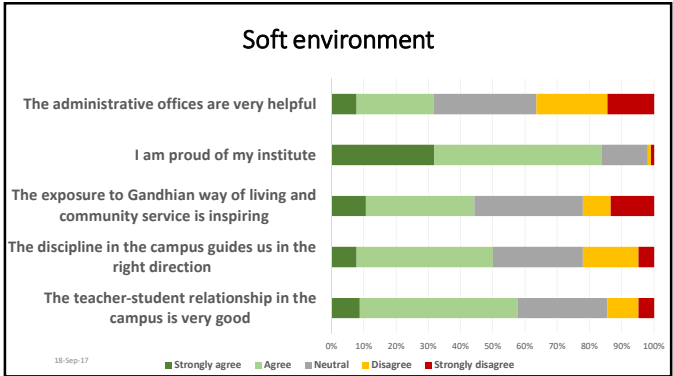
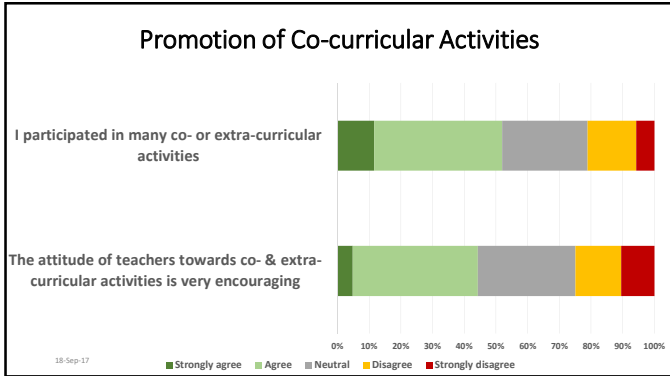
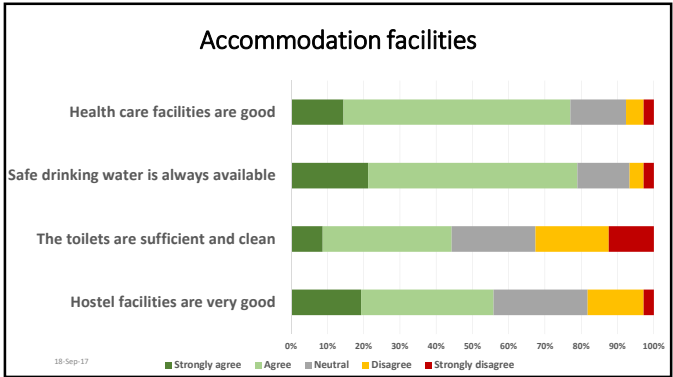
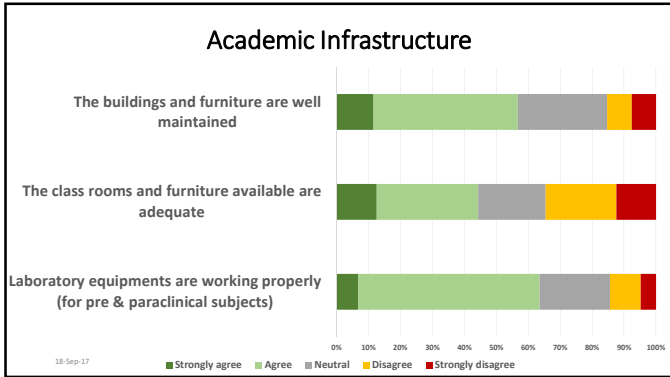
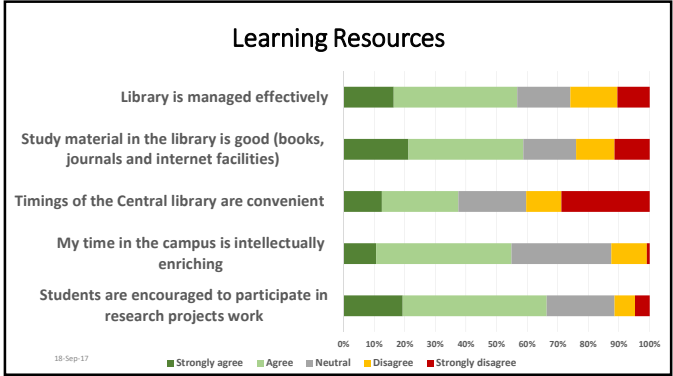
IMPORTANT PHONE NUMBERS (To be printed on Hind Page)

<b>Sr. No</b>	<b>Offices</b>	<b>Mobile No.</b>	<b>PBX</b>
1	Secretary, KHS	9422141693	255
2	Dean, MGIMS	9049577833	210
3	Medical Superintendent, Kasturba Hospital	9422141694	201
4	Account Section	284676	299
5	Warden (Boy's Hostel)		237
6	Warden (Girl's Hostel)		297
7	Anti Ragging Committee	9423118077	282
8	Casualty		229
9	Ambulance		229
10	Dietary		281
11	Library		323
12	CAO	9422141697	

# Student Feedback

## Analysis for 2016-17

18-Sep-17



# Subject-wise feedback

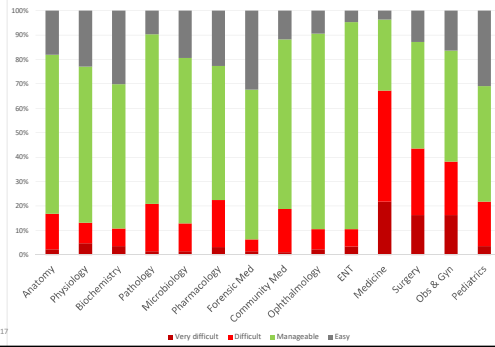
18-Sep-17

Feedback received from the following batches for

- 2012: Medicine, Surgery, Obs/Gyn, Pediatrics
- 2013: Community Medicine, ENT, Ophthalmology
- 2014: Pathology, Microbiology, Pharmacology, Forensic Medicine
- 2015: Anatomy, Physiology, Biochemistry

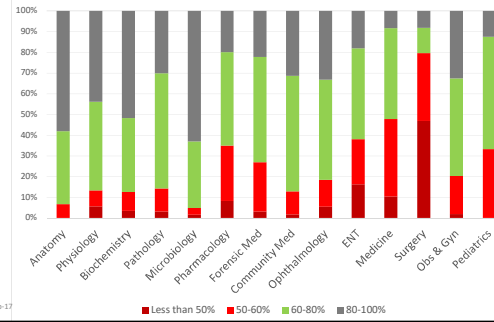
18-Sep-17

Was the course easy/difficult to understand?



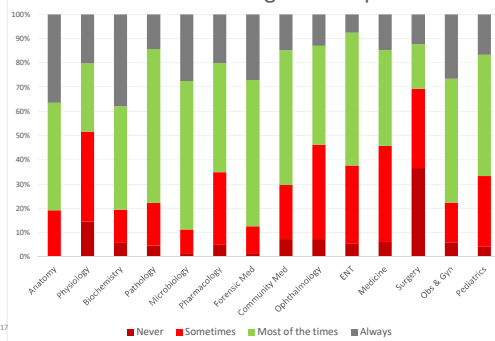
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How much of the syllabus was covered in the theory and practical classes?



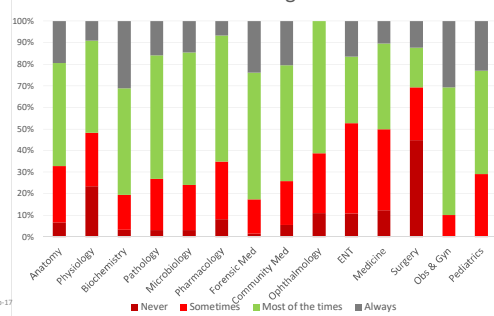
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Was the teaching staff helpful?

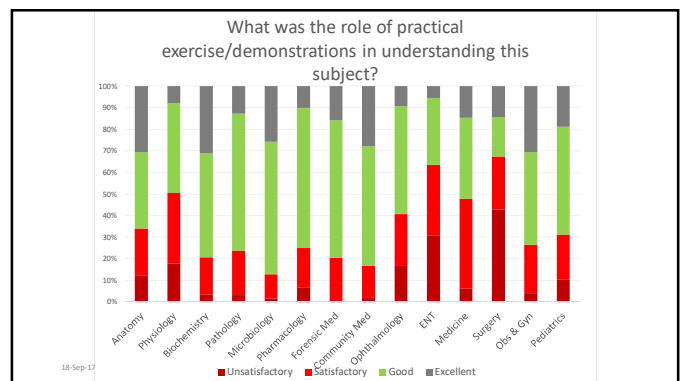
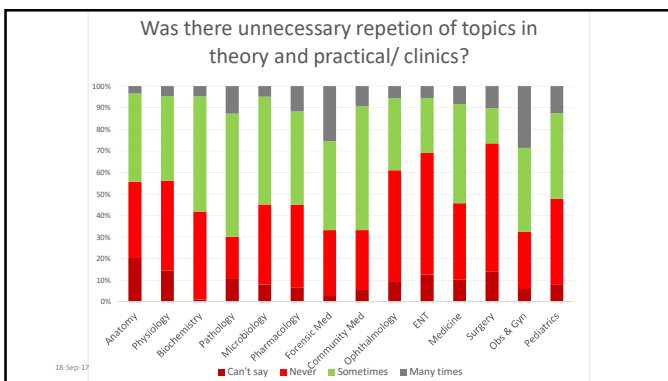
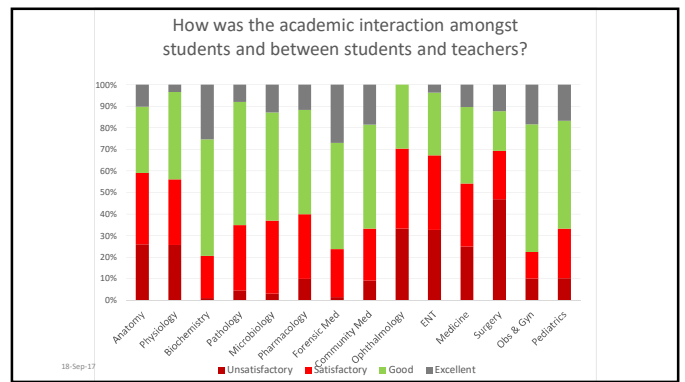
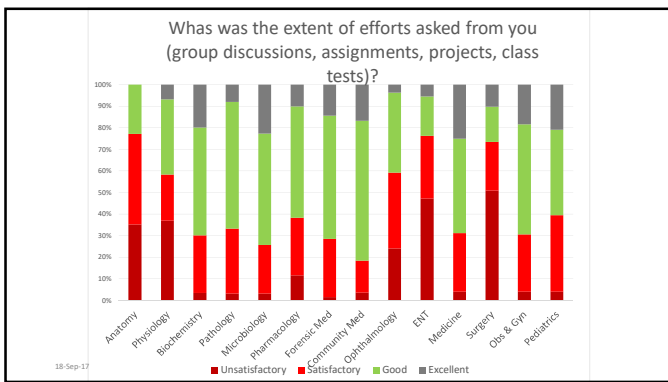
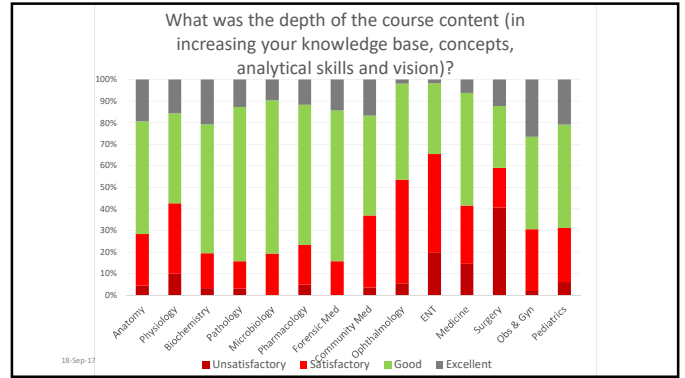
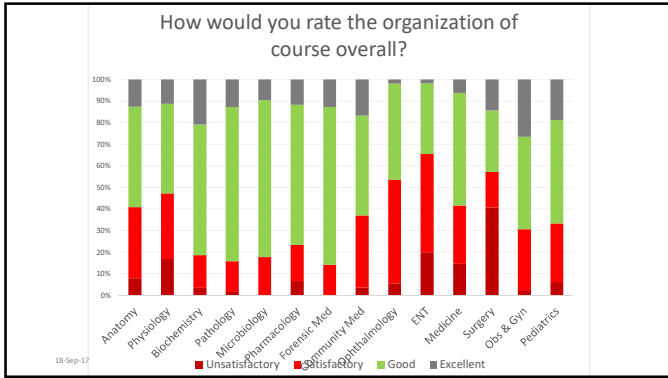


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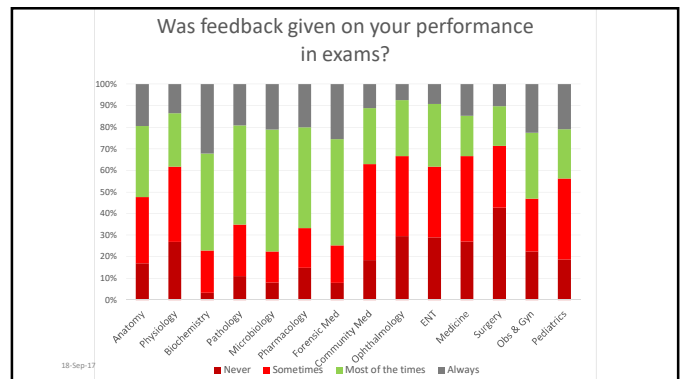
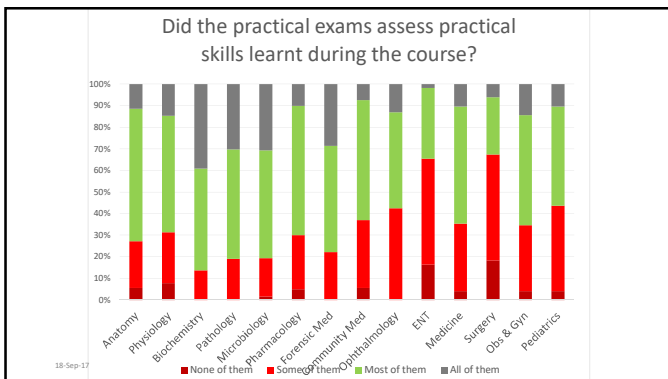
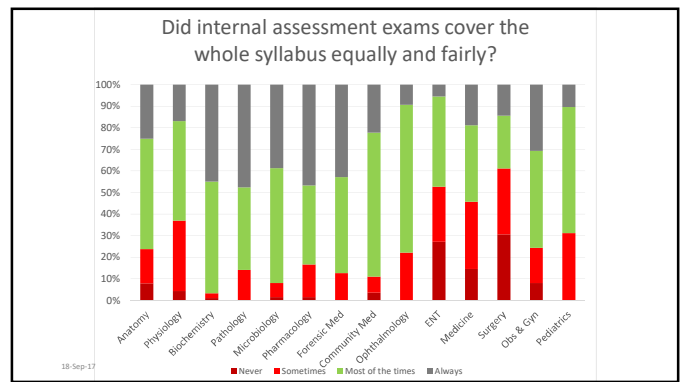
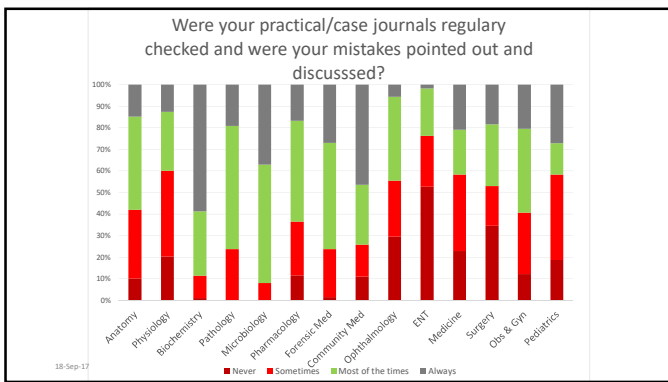
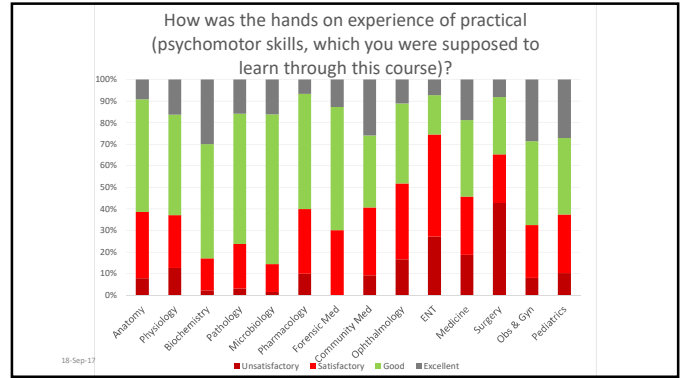
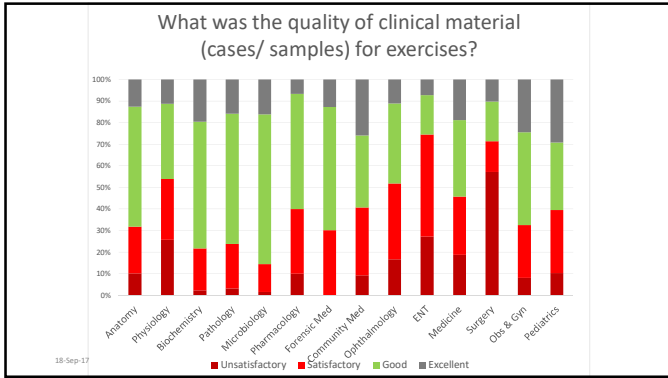
Were you comfortable with the pace of teaching?

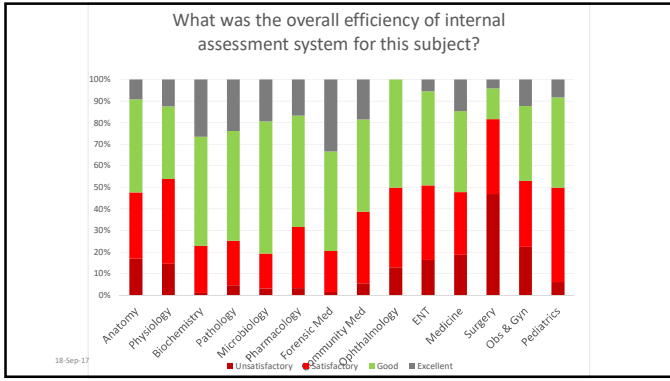


18-Sep-17









# Funded Research

		Grant (Rs. in Lakhs)
<b>Anatomy</b>	<b>Genetic study of mutation/ polymorphism in X-linked hTAF7L gene related to idiopathic human male infertility cases.</b> Pal AK, Chaudhari AR Funded by DHR, Ministry of Health, GOI, 2016 – 2019	<b>45.12</b>
<b>Biochemistry</b>	<b>Maintenance of repository of filarial parasites and reagents</b> Reddy MVR, Goswami K Funded by DBT, 2012-2017	<b>23.08</b>
	<b>Elusive role of HDL-C in metabolic syndrome and impending CVD</b> Waghmare P, Goswami K, Deshmukh PR Funded by DBT, 2017-2020	<b>6.75</b>
	<b>Clinical usefulness of exploring immunological host response in tubercular infection</b> Waghmare P, Kumar S, Anshu Funded by MUHS, Nashik, 2015-2016	<b>#</b>
<b>Community Medicine</b>	<b>Phase III, multicenter, randomized, double-blind, placebo-controlled study to evaluate the efficacy and safety of live attenuated Bovine-Human Rotavirus Reassortant Pentavalent Vaccine (BRV-PV) against severe Rotavirus gastroenteritis in healthy Indian infants</b> Garg BS, Gupta SS, Maliye CH, Jain M, Bahulekar P, Raut AV, Solanki RS, Funded by PATH/SIIL, 2013-2016	<b>14.28</b>
	<b>Concurrent Monitoring for Quality Improvement in ICDS</b> Garg BS, Gupta SS, Maliye CH, Raut AV, Ambilkar A Funded by NIPCCD, GOI, 2008 onwards	<b>0.66</b>
	<b>Health system in Maharashtra for addressing NCDs through primary care - A baseline assessment</b> Garg BS, Gupta SS, Raut AV, Solanki R, Ambilkar A Funded by WHO, India, 2016-2017	<b>6.74</b>
	<b>Centre for Advanced Research for Community Based Maternal, Newborn and Child Health (ICMR)</b>	<b>84.0</b>
	<b>A. Community-owned Management Information System: An alternative model of community monitoring for health</b> Garg BS, Gupta SS, Maliye CH, Bharambe MS, Bahulekar PV, Raut AV, Solanki RS, Ambilkar A	

- B. Central India Rural Pregnancy Cohort**  
Garg BS, Shivkumar PV, Gupta SS, Deshmukh PR, Maliye CH, Bharambe MS, Bahulekar PV, Raut AV, Solanki RS, Pawar R
- C. Improving health care seeking for morbidities among newborns and young infants in rural Wardha**  
Garg BS, Gupta SS, Maliye CH, Jain M, Bharambe MS, Bahulekar PV, Raut AV, Solanki RS

<b>JBTDRC &amp; Bioinformatics Centre</b>	<b>Tropical Disease Research Program for TB Diagnostics</b> Harinath BC Funded by KHS, 2015-2016	<b>3.00</b>
	<b>Sub-Distributed Information Centre under BTISnet Programme</b> Harinath BC, Kumar S Funded by DBT, GOI, 2016-2017	<b>2.91</b>
<b>Microbiology</b>	<b>Confirmation of diseases of public health importance under the IDSP (Integrated Disease surveillance Project) State surveillance net work (Referral Lab)</b> Deotale V, Maraskolhe D Funded by Govt. of Maharashtra, 2010 onwards	<b>1.00</b>
	<b>Sentinel Surveillance Hospitals Vector Borne Disease</b> Thamke D, Deotale V, Attal R Funded by Govt. of Maharashtra, 2011 onwards	<b>1.00</b>
	<b>A prospective multi-centric cohort study to assess risk factors for unfavourable treatment outcomes, including recurrent TB, among sputum positive pulmonary tuberculosis patients treated with category I regimen of RNTCP</b> Narang P, Narang R, DTO Wardha, CTO Nagpur Funded by Central TB Division, New Delhi, 2013-2017	<b>17.31</b>
	<b>Multicentric hospital-based surveillance of acute encephalitis syndrome for viral etiology among children in selected districts of Maharashtra and Andhra Pradesh</b> Narang R, Deotale V, Gangane N, Attal R Funded by NIV, Pune, 2014 onwards	<b>12.36</b>
	<b>Surveillance of selected zoonotic diseases in Central India</b> Narang R, Deshmukh PR, Deotale V, Maraskolhe D, Jain M, Narang U, Raut AV, Kalore DR, Kurkure NV Funded by ICMR, New Delhi, 2015 onwards	<b>31.35</b>
<b>Capacity Building and strengthening of hospital infection control, detect and prevent antimicrobial resistance in India</b> Deotale V, Attal R Funded by ICMR, AIIMS, CDC India, 2016-2021	<b>5.00</b>	

	<b>MGIMS Regional centre for Antibiotic resistance surveillance Network</b>	<b>16.77</b>
	Deotale V, Narang P, Maraskolhe D, Attal R Funded by ICMR, 2017 – 2022	
<b>Microbiology and Obstetrics &amp; Gynecology</b>	<b>Prevention of parent to child transmission of HIV / AIDS</b>	<b>*</b>
	Deotale V, Chhabra S Funded by Govt of Maharashtra, 2002 onwards	
<b>Obstetrics &amp; Gynecology</b>	<b>Jiv Daya Partograph Project</b>	<b>2.84</b>
	Shivkumar PV Funded by Jiv Daya Foundation, Dallas, Texas, USA, 2013 onwards	
	<b>Epidemiological determinants of hypertensive disorders of pregnancy in women in Central India</b>	<b>7.56</b>
	Jain S, Deshmukh PR Funded by ICMR, New Delhi, 2015 – 2018	
	<b>Community based study of magnitude of abortion, spontaneous and induced, immediate and late complication and care sought by rural women of two districts of Maharashtra, India</b>	<b>23.69</b>
	Chhabra S Funded by ICMR, New Delhi, 2015 onwards	
	<b>Hypertensive disorders of pregnancy, prevention, early detection, prevention of severity and mortality through cost effective sustainable ways in two tertiary centres in two states of India</b>	<b>2.52</b>
	Chhabra S Funded by Shrimant Shankaradevi University of Health Sciences, Guwahati, Assam, 2015-17	
	<b>Magnitude of day to day life health problems in elderly women of Melghat</b>	<b>3.20</b>
	Chhabra S Funded by GHETS, 2015 onwards	
	<b>Emergency Obstetric Care</b>	<b>#</b>
	Shivkumar PV Funded by Govt of Maharashtra, Govt of India, FOGSI, AVNI Foundation, 2008 onwards	
	<b>Educating rural Indian women about domestic and sexual violence by utilizing ANM and ASHA</b>	<b>0.99</b>
	Tayade S Funded by GHETS, USA, 2016-17	
	<b>Postpartum Haemorrhage</b>	<b>4.03</b>
	Shivkumar PV Funded by Harvard University, 2016 onwards	
	<b>Low cost salivary progesterone testing for detecting the risk of preterm births in rural community setting of India</b>	<b>13.48</b>
	Shivkumar PV Funded by Biotechnology Industry Research Assistance Council (BIRAC), GOI, 2016 onwards	

<b>Pathology</b>	<b>Population Based Cancer Registry of Wardha District</b>	<b>34.79</b>
	Gangane NM Funded by ICMR, 2010 onwards	
	<b>HPVAhead: Role of human papillomavirus infection and other co-factors in the etiology of head and neck cancer in Europe and India</b>	<b>7.50</b>
	Gangane NM Funded by IARC, 2015-2016	
	<b>Expression of ER,PR, HER2/neu, Ki67 and p53 markers in endometrial carcinoma: Clinicopathological implications and prognostic value</b>	<b>0.75</b>
Shivkumar VB, Atram M, Gangane N Funded by MUHS Nashik, 2015-2016		
	<b>Prognostic value of expression of cytokeratin 5/6, EGFR, e-cadherin and p53 in triple negative breast cancers in central India</b>	<b>0.25</b>
Anshu, Gangane N Funded by MUHS Nashik, 2015 onwards		
	<b>Population Based Cancer Survival on Cancers of the Breast, Cervix, Head and Neck</b>	<b>0.8</b>
Gangane N Funded by ICMR, 2017 onwards		
<b>Ophthalmology</b>	<b>Reducing Blindness from Diabetic Retinopathy in India in Maharashtra (Wardha District)</b>	<b>45.0</b>
	Shukla AK, Singh S Funded by The Queen Elizabeth Diamond Jubilee Trust, 2017 onwards	
	<b>Sight First Project SF 1802/323-H1</b>	<b>80.0</b>
	Shukla AK, Singh S Funded by Lions Clubs International Foundation (LCIF)	
<b>Pediatrics</b>	<b>National Neonatal Perinatal Database</b>	<b>3.00</b>
	Jain M Funded by WHO SEARO, 2015-2017	
<b>Pharmacology</b>	<b>Pharmacovigilance project</b>	<b>*</b>
	Varma SK, Gosavi DD, Kale R, Chimurkar L, Pethe M Funded by Government of India	
<b>Physiology</b>	<b>Prevalence and risk factors of obstructive sleep apnea-hypopnea syndrome in rural Indian population: A community based cross-sectional study</b>	<b>9.52</b>
	Pawar S, Chaudhari AR, Shende V, Deshmukh PR, Yelwatkar S, Jain V Funded by ICMR, New Delhi, 2015-2016	
	<b>Diagnostic utility of electroneuromyography and late responses in cervical radiculopathy</b>	<b>0.19</b>
	Shende V, Pawar S Funded by MUHS Nashik, 2016 onwards	

\* Emoluments directly paid by Govt

## Research Projects Completed

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- Anatomy** • Genetic study of deletions and mutations in sperm mitochondrial DNA in idiopathic and oligoasthenoteratozoospermia of infertile men.
- Biochemistry** • Funds for Improvement of S & T Infrastructure in Universities and Higher Educational Institutions (FIST) programme
  - Evaluation of immunomodulatory effect and therapeutical potential of filarial proteins in experimental ulcerative colitis
- Community Medicine** • Community-owned Management Information System: an alternative model of community monitoring for health
- Physiology** • Impact of chronic alcoholism on visual evoked potentials : A neuropsychiatric perspective

# ICMR and MUHS Short term Studentships

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- Anatomy**      **Potharkar A; Guide: Shende MR**  
Perception and attitude of undergraduate students on use of social media:  
A cross sectional study
- Bhongle R; Guide: Bokariya P (MUHS-STRG)**  
Anthropometric measurements of hypertensive patients with special emphasis on  
facial features
- Biochemistry**      **Chowdhary S; Guide: Goswami K**  
To determine and explore the mechanisms of the anti-filarial action of chalcon  
derivatives against *Brugia malayi* parasite
- Community  
Medicine**      **Joshi M; Guide: RautA**  
Maternal depression and its association with responsive feeding and nutritional  
status of infants. A cross-sectional study from a rural medical college in central India
- Microbiology**      **Potharkar A; Guide: Attal R**  
Microbiological profile of chronic sinusitis with special reference to fungal  
rhinosinusitis: a study in Central India
- Obstetrics and  
Gynecology**      **Jha C; Guide: Kumar P**  
A retrospective study of intercurrent eclampsia and perinatal outcome in Central  
India at MGIMS, Sevagram, Wardha
- Pathology**      **Kumari S; Guide: Gupta A**  
Knowledge and attitude profile of hospital visitors towards blood donation in central  
India
- Physiology**      **Yadav A; Guide: Kothari R**  
Impact of yoga on stress experienced by medical students- An interventional study
- Panchal V; Guide: Kothari R (MUHS-STRG)**  
An investigative study on impact of smoking on visual evoked response of healthy  
volunteers



## **Best Practices at MGIMS Sevagram Orientation Camp**

### **1. Title of the Practice**

Orientation Camp

### **2. Objectives of the Practice**

This orientation camp is conducted for newly admitted students, with the objectives:

- To orient them to a value system based on Gandhian ideology
- To help students adapt to the new environment at MGIMS, Sevagram
- To sensitize students to the code of conduct followed at MGIMS, Sevagram
- To sensitize students to the need of developing personal and professional skills; e.g. working in teams, stress management, time management etc.

### **3. The Context**

Most medical schools in India do not include components of value education. Education which does not inculcate values has great perils. An important question to be asked about contemporary medical education is: are we producing physicians with robust moral values? The Orientation Camp (together with other innovations in curriculum at Sevagram) is an effort to introduce students who have been admitted into the MBBS course to value education.

When students join medical school, they are excited, but also apprehensive about the new environment. There is need to build a system which helps students adapt easily to the new environment.

### **4. The Practice**

Soon after admission to MGIMS, students attend a 15-day orientation course in the Gandhi Ashram at Sevagram. Eminent Gandhians and people who have dedicated themselves to the service of the underprivileged are invited to deliver lectures on Gandhian Thought. Students are thus helped to appreciate the humanistic dimensions of their profession.

The daily routine of the students includes morning and evening all-religion prayer, yoga classes and sports. The students engage in self-help and learn the value of dignity of labour by washing their own utensils and cleaning their own clothes. Students also participate in community activities like spinning yarn, shramdan and all religion prayer.

The students are taught about the relevance of Gandhian ideology in today's world with reference to personal hygiene, environmental sanitation and nutrition. During the camp, students are also oriented to alternate systems of medicine like yoga and nature cure and spiritual health.

Over the years, we have also made efforts to reorganize and modify the curriculum of the orientation camp in view of the recommendations of the Medical Council of India to develop it as a Foundation Course. Recently, we have started sensitizing students to need to develop personal and professional skills such as, communication skills, stress management and time management. A workshop on 'Values in healthcare: a spiritual approach' (VIHASA) adapted from the modules developed by the Prajapita Brahma Kumari Group for the Maharashtra University of Health Sciences was also piloted in the camp.

### **5. Evidence of Success**

The feedback from students and alumni regarding the Orientation camp has always been positive. Students said that the camp made them aware of the current socio-political environment for health, helped them recognize the rights and equality of all people, gave them the concept of health as a human right and made them believe in health equity. The camp also helped them develop a sense of security and prevented feelings of homesickness and loneliness.

### **6. Problems Encountered and Resources Required**

MGIMS, Sevagram has the unique advantage of being located in the vicinity of Gandhi Ashram in Sevagram. Organizing a residential camp for students, immediately after students enter the college, has its own challenges. Many students find it difficult to adapt to Ashram life and some of them do crib about this while they are attending the camp. However, all of them later vouch that it was a life-time experience which helped them in several ways.

### **7. Notes**

The Orientation Camp is part of curricular innovation at MGIMS, Sevagram. It is important that it is viewed in totality together with other curricular innovations.

## **Best Practices at MGIMS Sevagram**

### **1. Title of the Practice**

Community Mobilization for Health Action

### **2. Objectives of the Practice**

The Department of Community Medicine, MGIMS, Sevagram engages in community mobilization with the following objectives:

- To mobilize and empower community networks (with focus on women) for leadership in health
- To create platform for community dialogue in health
- To catalyze partnership between health and ICDS sector on one hand and Panchayati Raj Institutions, Village Health Nutrition and Sanitation Committees and other Community-based Organizations on the other hand for health gains

### **3. The Context**

Community Participation is a process by which people are enabled to become actively and genuinely involved in defining the issues of concern to them, in making decisions about factors that affect their lives, in formulating and implementing policies, in planning, developing and delivering services and in taking action to achieve change. It is an active two-way process that may be initiated and sustained both by individuals and community and by local authorities, health authorities and other local organizations.

A high level of community participation is very important for any programme to succeed. Under NRHM, several strategies were included to get a high degree of community participation in health. However, implementation of these strategies has been extremely poor in most of the states of India.

The Department of Community Medicine at MGIMS, Sevagram, is working with community-based organizations in more than 80 villages in Wardha district for almost two decades and has developed a model of community mobilization for health action.

### **4. The Practice**

Over the last two decades, in the field practice area of MGIMS, Sevagram, a strong community network has been developed. The process of development of community network started with community mobilization and formation of community-based

organizations. In an average-sized village a minimum of 3-4 women's self-help groups (SHGs), one 'Kisan Vikas Manch' (KVM - Farmer's Development Association) and one 'Kishori Panchayat' (KP - Adolescent Girls Forum) was constituted. These community-based organizations were oriented on health issues in the rural areas through discussion held during their monthly meetings. Later, Village Co-ordination Committee (VCCs) was constituted in every village by including representatives from each of these community-based organizations, Gram Panchayat, village informal leaders and frontline workers from health and ICDS.

The community-based program operated through the Village Co-ordination Committees (VCCs), thus constituted. These village committees entered into an agreement under this project where the VCC will ensure provision of essential maternal and child health services to the villagers, while MGIMS, Sevagram took responsibility to build capacity of these committees and develop tools and techniques for community-based activities to be done by the committees. With strong and sustained capacity-building in form of regular handholding for more than a year, the VCCs could take charge of community-based activities at village level. In most of the program villages, the VCCs participated in assessment of community health needs, developed village health plan, implemented the activities decided in coordination with other stakeholders, and monitored the community-based health activities in their respective villages. The community networks were especially effective in disseminating health messages in the village and for creating new social norms.

When guidelines for formation of Village Health Nutrition and Sanitation Committees (VHNSC) were issued by Government of Maharashtra under NRHM, we engaged with them and worked to build their capacity. Currently, we are working in more than 80 villages in Wardha. There are total 275 Self Help Groups and 89 Kishori Panchayats functional in the three PHC areas adopted by the department of Community Medicine. We also conduct Kiran clinics (Community owned health clinics) in 26 villages.

## **5. Evidence of Success**

The following table shows the changes observed endline and compares it with baseline level:

**Table: Change in MCH indicators from baseline to final estimate after implementation of CLICS (Community-led Initiatives for Child Survival)**

<b>Indicators</b>	<b>Baseline Estimate 2004</b>	<b>Final Estimate 2008</b>
% mothers of <1s receiving ANC package (at least 3 visits, 2 TT, consumed 100 IFA tablets)	11.6%	58.9%
% of husbands aware of at least 3 pregnancy danger signs	13.2%	42.2%
% mother of <1s delivered in health facility	72.8%	90.7%
% children <3s with at least 36 months interval after previous surviving child	29.3%	49%
% of children born Low Birth Weight	29.4%	25%
% mothers of <1s initiating breastfeeding within 1 hour:		
- knowledge/awareness	0.6%	68%
- practice	0.9%	67.9%
% mothers of <1s knowing at least 3 newborn danger signs	11.3%	94.2%
% of children (12-23 months) fully immunized	62.4%	98%
% of children (12-35 months) received Vitamin A dose in last 6 months	53.6%	98
% mothers of <3s knowing at least 2 signs of childhood illness requiring treatment	29.5%	98.5%
% of <3s suffering from diarrhea in last 2 weeks who received ORS/HAF	6.8%	62.2%
% of <3s -3 SD from the median weight for age	22%	11.6%

We also assessed maturity of Village Health Nutrition and Sanitation Committee using institutional maturity index specially designed for this purpose; it changed from first phase to the next phase. It changed from 58 to 77.

Several innovative activities have been initiated by the community-based organizations in every village of the program area.

## **6. Problems Encountered and Resources Required**

Some of the challenges, we encountered in the process are:

- To bring people together from different socio-economic groups
- Community groups require a lot of initial “hand holding”
- Difficult to introduce health as a priority in their lives
- Bringing on board health department, ICDS and PRI is challenging
- Sustaining the motivation and enthusiasm of community-based organization in absence of funding support

While we were developing this program, we required a trained community organizer (a social worker) for every 4-5 villages. We also required provision for capacity building of community-based organization. For sustaining these activities, a social worker for 10-15 villages may do. However, what is more important is the community contribution of resources, mainly in terms of their time and interest.

## **7. Notes**

We acknowledge the support provided under various projects from Aga Khan Foundation (India), Aga Khan Foundation (USA) and USAID from 2000 to 2009. These supports were critical in developing the model of community mobilization for health action. After completion of Community-led Initiatives for Child Survival Program, MGIMS, Sevagram has made provision to sustain several elements of the initial program. Staff support under Phase III clinical trial on Bovine-Human Rotavirus Reassortant Pentavalent Vaccine (BRV-PV) from SIIL and PATH Vaccine Solutions and ICMR Advance Center for Community-based Research in Maternal, Newborn and Child Health been of great help.