

Summary of Psychiatry Assessment report – to be completed by the Assessor.**Date of Assessment:-****Name of Assessor:-**

1	Name of the institution		Name and other particulars of Institution (Dean/Director)	
			PG degree: Recognized/Non-R	
			Teaching Experience (in years) :	
		Age: years		
2	Department Inspected		Name & other particulars of Head of Department with submitted address proof	
			PG degree: Recognized/ Non-R	
			Teaching Experience (in years) :	
		Age: years.		
3	Date of last Assessment of the Department (with Report):			
	Letter of permission from MCI for the MBBS course.			
	Date of LOP for MBBS course received from MCI			
4	Total PG Teachers in the Department (with requisite qualifications & Experience			
	Designation	Number	Name	Total Experience
	Professors			
	Assoc. Professors/Readers			
	Asstt. Professors			
	<ul style="list-style-type: none"> - All teachers should be physically identified. - Detailed Performa (with photograph affixed) in respect of every teacher must be obtained which signed by the concerned teacher, HOD and Head of institution - To ensure that staff is full time, paid and not working in any other institution simultaneously. - The PAN number and the residence address should be verified for all the serving faculty members. 			
5	Requisite important information of the Department			
	<i>No of available PG teachers</i>			
	<i>Number of units available</i>			
	<i>Total number of available teaching beds with distribution</i>			
	<i>Teaching complement in each unit</i>			
	<i>Total daily clinical workload (Unit-wise for average daily OPD and IPD</i>			
	Equipments and other expected facilities			
	Recovery Room			
	Intensive Care Units			
	Departmental Library – Book/Journals			
Annual Intake of post graduate seats sanctioned: (a) Degree _____				
No of PG students presently undergoing course: (a) Degree _____				

Any other postgraduate medical courses run by the department _____				
If yes, No. of students at present: _____				
Mode of selection (actual/proposed) of PG students: _____ _____				
6	List of publication from the department for last three years.			
7	Daily Investigative Workload			
	PAC Fitness			
	Radiology workload			
	Bio-Chemistry workload (24 hrs emergency lab)			
	Pathology workload including the daily histopathology & FNAC			
	Microbiology workload			
8	The data submitted for last 3 years for the clinical workload			
	Any submission of data to national authorities			
	Specialty clinics and initiative national mental health programme			
9	Blood Bank facilities (24 hours open or not blood components available) with daily consumption of the Blood Units s required postoperative for the surgical disciplines.			
10	Incinerator			
11	Laundry			
12	Hostels for UG & PG students			
13	Accommodation for Staff			
14	Ongoing training programme for PG students with logbook			
15	Year-wise number of PG students admitted and available staff during the last 5 years	Year	No. of PG students admitted (Deg/Dip)	No. of recognized PG teachers in the department
	2002			
	2001			
	2000			
	1999			
	1998			

16. Final remarks by the Assessor: (No recommendations regarding permission/recognition be made) Give factual position only).

Signature of the Assessor

Note : Specific mention of required facilities as per MCI norms and commensurate with the degree under consideration must be made specifying whether these are Available/Not available.

Standard Assessment Form for Postgraduate courses
(PSYCHIATRY)

1. Name of Institution: _____

Annual Intake for U.G.: _____

Reference: _____

2. Particulars of the Assessor:-

Inspection Date _____

Name

Designation

Speciality

**Name & Address
of Institute/College**

.....

**Residential Address
(with Pin Code)**

.....

Phone

(Off)

(Resi).....

(Fax).....

Mobile No.

E-mail:

Signature of Assessor

3. (Institutional Information)**A). Particulars of college**

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

B). Particulars of Affiliated University

Item	University	Vice Chancellor	Registrar
Name			
Address			
State			
Pin Code			
Phone (Off) (Res) (Fax)			
Mobile No.			
E.mail:			

Signature of Dean/Principal

4. Details of PG courses and their sanctioned intake by MCI:

Department	Course	Sanctioned seats			
		Permitted		Recognized	
		When	No. of Seats	When	No. of Seats
Diploma in Anesthesia	Diploma				
Diploma in Child Health	Diploma				
Diploma in Community Medicine	Diploma				
Diploma in Clinical Pathology	Diploma				
Diploma in Diabetology	Diploma				
Diploma in Forensic Medicine	Diploma				
Diploma in Health Administration	Diploma				
Diploma in Hospital Administration	Diploma				
Diploma in Health Education	Diploma				
Diploma in Obstetrics & Gynaecology	Diploma				
Diploma in Industrial Hygiene	Diploma				
Diploma in Immuno-Haematology and Blood Transfusion	Diploma				
Diploma in Oto-Rhino-Laryngology	Diploma				
Diploma in Radio-Diagnosis	Diploma				
Diploma in Radio Therapy	Diploma				
Diploma in Medical Virology	Diploma				
Diploma in Occupational Health	Diploma				
Diploma in Ophthalmology	Diploma				
Diploma in Orthopaedics	Diploma				
Diploma in Public Health	Diploma				
Diploma in Physical Medicine & Rehabilitation	Diploma				
Diploma in Psychological Medicine	Diploma				
Diploma in Radiation Medicine	Diploma				
Diploma in Sports Medicine	Diploma				
Diploma in Tuberculosis & Chest Diseases	Diploma				
Diploma in Tropical Medicine Health	Diploma				
Diploma in Dermatology, Venereology and Leprosy	Diploma				
Diploma - Aviation Medicine	Diploma				
Diploma in Cardiology	Diploma				
Diploma in Microbiology	Diploma				
Diploma in Industrial Health	Diploma				
MD – Anaesthesiology	MD				
MD/MS - Anatomy	MD				
MD - Aviation Medicine/Aerospace Medicine	MD				
MD - Bio-Chemistry	MD				
MD - Bio-Physics	MD				
MD - Forensic Medicine	MD				
MD - General Medicine	MD				
MD - Community Health Administration	MD				
MD - Geriatrics	MD				
MD - Hospital Administration	MD				
MD - Health Administration	MD				
MD - Microbiology	MD				
MD - Nuclear Medicine	MD				
MD/MS - Obstetrics & Gynaecology	MD				
MD - Paediatrics	MD				

MD - Pathology	MD				
MD - Dermatology , Venereology & Leprosy	MD				
MD - Pharmacology	MD				
MD - Physiology	MD				
MD - Physical Medicine & Rehabilitation	MD				
MD - Psychiatry	MD				
MD - Radio Diagnosis/Radiology	MD				
MD - Radiotherapy	MD				
MD - Social & Preventive Medicine / Community Medicine	MD				
MD - Tuberculosis & Respiratory Diseases / Pulmonary Medicine	MD				
MD - Immuno Haematology & Blood Transfusion	MD				
MD - Tropical Medicine	MD				
MD - Pulmonary Medicine	MD				
MD - Sports Medicine	MD				
MD - Family Medicine	MD				
MS - Orthopaedics	MS				
MS - ENT	MS				
MS - General Surgery	MS				
MS - Ophthalmology	MS				
DM - Neurology	DM				
DM - Rheumatology	DM				
DM - Endocrinology	DM				
DM - Clinical Pharmacology	DM				
DM - Clinical Haematology	DM				
DM - Pulmonary Medicine	DM				
DM - Neuro Radiology	DM				
DM - Nephrology	DM				
DM - Neonatology	DM				
DM - Oncology	DM				
DM - Gastroenterology	DM				
DM - Cardiology	DM				
DM - Clinical Immunology	DM				
DM - Pul. Med. & Critical Care Med.	DM				
DM - Cardiac-Anaes.	DM				
DM - Haematology Pathology	DM				
DM - Medical Genetics	DM				
M.Ch - Cardio Thoracic and Vascular Surgery	MCh				
M.Ch - Neuro Surgery	MCh				
M.Ch - Paediatric Surgery	MCh				
M.Ch - Plastic Surgery	MCh				
M.Ch - Surgical Gastroenterology	MCh				
M.Ch - Surgical Oncology	MCh				
M.Ch - Urology/Genito-Urinary Surgery	MCh				
M.Ch - Endocrine Surgery	MCh				

5. Stipend paid/ Month (Amount in Rupees)

Category	Stipend paid/ month (Rs.)
Ist year	
IInd year	
IIIrd year	
Diploma Holder	
Senior Residents	

PART – I

6. Department inspected:

7. Particulars of HOD

- ◆ Name:
- ◆ Age :
- ◆ PG Degree { University
Institution
Year
- ◆ Total teaching experience (give details)

a) Purpose of Present Application:

_____ (For Grant of Permission/ Recognition/ Increase of seats in/ Renewal of recognition/Compliance Verification)

b) Relevant Background Information of the department:

Date of last MCI inspection of the department: _____
(Write Not Applicable for first MCI inspection)

Purpose of Last Inspection: _____

Outcome of last Inspection: _____
Quote letter no, and remarks forwarded by MCI after the inspection)

7. Mode of selection (actual/proposed) of PG students.

8. If course already started, year wise number of PG students admitted and available PG teachers during the last five years.

Year	Names of PG students admitted		Names of recognized PG teachers against whom the students were admitted.
	Degree	Diploma	

9. Central Library:

- Total No. of Books.
- Books pertaining to Psychiatry
- Purchase of latest editions in last 3 years.

Psychiatry Books	Other Books

- Journals:

	Total	Psychiatry
Indian		
Foreign		

- Year/month up to which Indian Journals available
- Year/ month up to which Foreign journals available.
- Internet /Medlar/ Photocopy facilities available/ not available.
- Library opening timings:
- Reading facility out of routine library hours

10. Hostel facilities: Accommodation (No. of rooms) available for

- For U.G. students
- For Interns
- For P.G. students

11. Ethical Committee (Constitution)

12. Medical Education Unit (Constitution).

(Specify number of meetings of these bodies held annually & minutes thereof)

13. Emergency/
Casualty
Department

- Available Space
- No. of beds
- Equipment(s)
- Available staff (Medical/Paramedical)
- No. of cases (Average daily attendance of patients & distribution).
- Investigative facilities available (round the clock).
- Facilities available

14. Central Laboratory

- Controlling Department.
- Working Hours.
- Investigative work load.

15. Central Research Lab.

- Whether there is any Central Research Lab.
- Administrative Control
- Staff
- Equipment
- Work load.

16. Investigative facilities (Approx. number of investigations done daily)

I. Pathology

- Haematology
- Histopathology
- FNAC
- Cytology

II. Microbiology

- Bacteriology
- Serology
- Mycology
- Parasitology
- Virology
- Immunology

III. Biochemistry

- Blood Chemistry
- Endocrinology
- Other fluids

17. Central Supply of Oxygen/Suction:

18. Central Sterilization Deptt.

19. Laundry :
.

20. Kitchen

21. Incinerator

- Available/ Not available.
- Functional/ not functional
- Capacity

22. Generator Facility:

23. Medical Record Section: Computerized/ Not computerized.

24. Recreational facilities:

- Play grounds.
- Gymnasium
- Auditorium

PART – II (Departmental Information)

General Departmental facilities:

- Total no. of beds in the department.
- No. of Units in the department.
- Unit wise teaching Resident staff (Annexed)

Note: Unit wise teaching Resident Staff should be shown separately for each unit on a separate page.

1. List of Non-teaching Staff in the department: -

S.No.	Name	Designation

2. 2. Available Clinical Material: **(Give the data only for the department of Psychiatry) – to be assessed only at the closing hours of the Hospital.**

- No of units available for clinical services per day
- Average daily OPD per unit
- Average daily IPD per unit.
- Average daily bed occupancy rate:
- Weekly clinical work load for OPD & IPD(define it per unit) -
- Year-wise available clinical materials (during previous three years) for the department of General Medicine

Parameters	Year 1	Year 2	Year 3
Total number of patients in OPD			
Total number of patients in IPD			
Weekly clinical work load for OPD			
Weekly clinical work load for IPD			
Average daily investigative workload along with distribution <ul style="list-style-type: none"> • Radiology • Biochemistry • Pathology • Microbiology 			
Average daily consumption of blood units with distribution			

3. Specialty clinics and services being provided by the department.

.....

.....

4. Teaching facilities:

	Number	Size	Sitting capacity
Seminar Rooms			
Demonstration Rooms			

Audiovisual Aids: Adequate / Inadequate.

5. Departmental Library:

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

6. Departmental Museum (Wherever applicable).

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

7. Departmental Research Lab.

- Space
- Equipment
- No. of publications from Indexed Non-indexed.
the department during the last three years.

8. Working Ward Side lab.

- Space
- Facilities

- Departmental Technicians

9. OPD Space:

- No. of rooms
- Patient Exam. arrangement: Adequate/ Inadequate
- Equipments Adequate/ Inadequate
- Teaching Space Adequate / Inadequate
- Waiting area for patients. Adequate / Inadequate
- Indoor Space: Adequate / Inadequate

10. Office Accommodation:

- Departmental Office
- Space
- Staff (Steno /Clerk).
- Computer/ Typewriter:

Office Space for Teaching Faculty:

- HOD
- Professor
- Assoc. Prof./ Reader
- Lecturer/ Asstt. Professor
- Resident duty room

11. Equipments:

List of important equipments available and their functional status & distribution of patients.

.....

.....

.....

.....

12. Specialized services being provided by the department.
- Substance abuse (De-addiction Services). Yes/ No
 - Medico legal services (Psychodiagnostic facilities including psychological testing/ I.Q. testing etc.) Yes/ No
 - Services for Child/Adolescent psychiatric/ psychological problems. Yes/ No
 - Geriatric Psychiatric care. Yes/ No
 - Community Psychiatry (help line, participation in national programme etc.)
Yes/ No
 - Ethical issues. Yes/ No
13. Facilities for the care and stay of acute cases (emergency care) available or not.
14. Chronic Psychiatric Care (Long stay cases) facilities
-Interview techniques (Questionnaires / Charts etc.) available or not.
Clinical exposure in :
- Internal Medicine
 - Neurology
15. Treatment facilities:
- Pharmacotherapy.
 - ECT
 - Occupational therapy.
 - Behavior therapy
 - Recreational therapy.
 - Group Exposure.
 - Psychotherapy
 - Clinical Psychologist
 - Any other.
16. Whether services of Psychiatric Social workers/ Psychologist available or not in the department.

17. Clinic Pathological conference
18. Submission of data to national authorities , if any
19. Publications from the department during the last three years (indexed & non indexed journal).
20. Any other information.

PART III

POSTGRADUATE EXAMINATION (Only At The Time Of Inspection)

1. Minimum prescribed period of training.
2. Minimum prescribed essential attendance.
3. Periodic performance appraisal done or not?
4. Details of examiners appointed by Examining University.
5. Whether appointment of examiners & conduct of examination as per prescribed MCI norms or not ?

Signature of Assessor