

Phone : 25367033, 25367035, 25367036
दूरभाष : 25367033, 25367035, 25367036
Telegrams : MEDCONCIND, New Delhi
तार : मेडकॉसिंड नई दिल्ली
Fax : 0091-11-25367024
E-mail : pg@mciindia.org; mci@bol.net.in
Website : www.mciindia.org



पॉकेट - 14, सेक्टर - 8,
द्वारका फेस- 1
नई दिल्ली-110 077
Pocket- 14, Sector- 8,
Dwarka Phase - 1
New Delhi-110077

भारतीय आयुर्विज्ञान परिषद्
BOARD OF GOVERNORS IN SUPER-SESSION OF
"MEDICAL COUNCIL OF INDIA"

P.G. 31.03.2011
I.No. 18

No. MCI-259(22)/2010-Med. 62/

Dated: 31.03.2011

LETTER OF PERMISSION

✓ The Dean/Principal,
Shadan Instt. of Medical Sciences, Research & Teaching Hospital,
Peerancheru, R.R. District,
Hyderabad-500 008 (A.P.)

Sub: Starting of MD(General Medicine) course at Shadan Institute of Medical Sciences Teaching Hospital & Research Centre (SIMS), Hyderabad under Dr. NTR University of Health Sciences, Vijayawada u/s 10A of the IMC Act, 1956 -Permission of Board of Governors- regarding.

Sir,

I am directed to refer your proposal for starting of **MD(General Medicine)** course at **Shadan Institute of Medical Sciences Teaching Hospital & Research Centre (SIMS), Hyderabad** under **Dr. NTR University of Health Sciences, Vijayawada** u/s 10 A of the I.M.C Act. 1956.

This is to inform you that after careful consideration of the scheme and the assessor's report(March, 2011), the Board of Governors has decided to grant Letter of Permission for starting of **MD(General Medicine)** course with annual intake of **2(Two)** students per year with effect, from the academic session 2011-12 at your Institute/college u/s 10A of the I.M.C. Act, 1956.

This Letter of Permission is subject to fulfillment of the following conditions:-

1. The applicant shall continue to provide all infrastructural facilities in terms of teaching and non-teaching staff, buildings, equipment and hospital facilities as per norms laid down in Regulations of Medical Council of India.
2. Deficiencies, if any, pointed out in the inspection report, shall be rectified. A copy of MCI inspection report is enclosed.
3. The applicant shall provide Bank Guarantee of required amount wherever required in favour of Secretary, Medical Council of India, New Delhi valid for three years from a nationalized/scheduled Bank as per MCI's norms against starting of above said course.

You are requested to send compliance and bank guarantee as required under the Regulations of Medical Council of India within 15(Fifteen) days of issue of this letter failing which the Letter of Permission issued for starting of above course shall stand cancelled which shall result in forfeiture of right of the college/institution to admit the students in the above course.

Kindly acknowledge receipt of this letter.

Yours Faithfully


[Dr. Sangeeta Sharma]
Secretary

CC to:

Dated : _____

1. The Special Chief Secretary, Health, Medical & Family Welfare Deptt., Govt. of A.P., H Block, A.P. Secretariat, Hyderabad-500022, A.P.
2. The Registrar, Dr. N.T.R. University of Health Sciences, Vijaywada - 520008, A.P.
3. The Secretary to the Govt. of India, Ministry of Health & F.W., Nirman Bhawan, N.Delhi-110011.
4. PS to Chairman, Board of Governors, Medical Council of India, Sector-8, Dwarka, New Delhi.