

**THE TAMILNADU Dr.M.G.R. MEDICAL UNIVERSITY, CHENNAI – 600 032.**

**BACHELOR OF UNANI MEDICINE AND SURGERY DEGREE COURSE**

**TO GRANT CONTINUANCE OF PROVISIONAL AFFILIATION FOR  
CONDUCTING ENTIRE BUMS DEGREE COURSE INCLUDING C.R.R.I**

**INSPECTION REPORT**

Note :- The Inspectors must fill up all the columns with relevant details in the own hand writing and no columns should be left blank

I	Name of the Convenor with Designation and Address	:	
	Phone Number Office	:	
	Phone Number Residence	:	
	Cell No.	:	
II	Name of the Member with Designation and Address	:	
	Phone Number Office	:	
	Phone Number Residence	:	
	Cell No.	:	
III	University Letter No. and Date in which the Inspection Commission constituted	:	
IV	Date of Inspection / Location where inspection conducted	:	
V	Place and details of authorities representing the Management / Govt. present at the time of Inspection	:	

1.	Name of the Managing Trustee and Name of the Society / Trust and its full registered address with telephone Numbers (Telex No., Fax.No., E-Mail etc.	:	
2.	Name of the Unani Medical College and Address with Telephone Numbers (Telex No., Fax No., E-Mail No. etc.)	:	
a.	To furnish the details of an extent area of academic complex available at present to conduct BUMS degree course	:	
b.	To mention the Total Ready Build Area available exclusively for BUMS degree course	:	
c.	State Whether the academic complex is in own or rental building	:	
3.	Name of the Principal of the Unani College	:	
a.	Qualification	:	
b.	Teaching Experience	:	
c.	Working as Principal from	:	
4.	a. Name of the other courses run by the Trust	:	
b.	Specify the courses conducted in the same complex	:	
c.	Whether sufficient infrastructural facilities is made available separately for BUMS Degree Course	:	
5.	<b>Whether obtained</b> State Government Permission for BUMS Degree Course	:	G.O. No.: Lr.No. : Dated :
6.	Whether the Trust has obtained Minority Statutes, if so furnish the G.O and the academic year for in which the Minority Statutes obtained (Enclose a copy of G..O)	:	
7.	Year of commencement of the I BUMS Degree Course	:	Year : No. of Intake :

8.	Whether Current Letter of Permission from the Ministry of AYUSH/CCIM, New Delhi (copy to be enclosed)	:	
9	Provisional Affiliation issued by the University (copy to be enclosed)	:	Lr.No. Date :
10	Continuance of Provisional Affiliation issued by the University upto the academic year	:	Lr. No. Date :
11	No.of Candidates Registered for the past three Academic Year.		
12	<b><u>LAND DETAILS:-</u></b>		
a.	Ear marked extent of land acquired for other courses by the same trust	:	
1.	For Pharmacy College	:	
2.	For Physiotherapy College	:	
3.	For Indian System of Medicine	:	3 acres
4.	For Dental College	:	
5.	For Medical College	:	
6.	Others	:	
	Total		
b.	Whether the proposed / existing Unani College own and possess a minimum of acres with clear title over the land without encumbrance to locate the Administrative Block & Hospital for BUMS Degree Course	:	Total No. of acres:
c.	Whether the college is located in an Urban agglomeration or Municipal Zone or Rural Area	:	
d.	Extent of land available for the Institution	:	
e.	Copy of Registered Sale Deed of Land regarding proof of ownership	:	
f.	Sworn Affidavit before a Notary Public starting the details of land with survey Nos. furnished are earmarked for the Unani College only (Copy to be enclosed)	:	
g.	Legal Opinion of the Government Pleader on the ear marked land with Survey Nos. Extent of land noted therein. (Copy to be enclosed)	:	

	h.	Upto date Encumbrance Certificate obtained from the Registering Authority in the name of the trust for not less than 30 years	:	
		Note :- List of enclosures to be sent along with the Inspection Report for grant of Provisional Affiliation		
13		READY BUILT AREA:	:	
	a.	Furnish details regarding the actual availability of ready built area in sq.mts. For conducting Uani Degree Course of study	:	(in sq.meter) Academic Complex: Hospital Complex : Herbal Garden :
	b.	Whether the own building is constructed in the land and building owned in the name of the Society / Trust	:	
	c.	Building Completion Certificate for ready built area obtained from Govt.Eng./Collector Panel Eng./PWD Eng./ Licensed Surveyor along with the authority letter for who is a competent authority for issuing the above certificate	:	
	d.	Structural Soundness Certificate from the Competent Engineer along with the authority (i.e) Proceeding Order.	:	
	e.	Enclose a copy of the DTCP/CMDA approval for Building plan of Unani College and Hospital by the Competent Municipal/ Panchayat authority duly indicating their office ref.No. And date along with office date seal and covering letter for the approval.	:	
	g.	Sanitary Certificate from Municipality/ Corporation	:	
	f.	Fire Certificate from fire service Department	:	
14		<b>HERBAL GARDEN:-</b>	:	
	a.	To mention the total extent area available for Herbal Garden	:	
	b.	To mention the total No. of Medicinal plants available in the Herbal Garden.	:	
	c.	The address & distance of Herbal Garden from the College.	:	

15. TEACHING STAFF PATTERN :-

SI No	DEPARTMENT	Upto 60 Admission						From 61 to 100 Admission								
		PROFESSOR/ READER / ASSOCIATE PROFESSOR			ASST. PROFESSOR			PROFESSOR			READER / ASSOCIATE PROFESSOR			ASST. PROFESSOR		
		R	A	S	R	A	S	R	A	S	R	A	S	R	A	S
1	Kulliyat	1 or 1			1			1			1			1		
2	Tashreehulbadan	1 or 1			1			1			1			1		
3	Munafel Aza	1 or 1			1			1			1			1		
4	Ilmul Advia	1 or 1			1			1			1			1		
5	Ilmul Saldla	1 or 1			1			1			1			1		
6	Mahiyatul Amraz	1 or 1			1			1			1			1		
7	Tahaffuza-wa Samaji Tib	1 or 1			2			1			1			2		
8	Moalajat	1 or 1			2			1			1			2		
9	Niswan wa Qabalat	1 or 1			1			1			1			2		
10	Ilmul Atfal	1 or 1			1			1			1			1		
11	Jarahat	1 or 1			1			1			1			1		
12	Ain-Uzn-Anf-Halaq wa Asnan	1 or 1			1			1			1			1		
13	Amraze Jild wa Tazeeniyat	1 or 1			1			1			1			1		
14	Ilaj Bit tadbeer	1 or 1			1			1			1			1		
	TOTAL	14			16			14			14			17		

**FOR 60 INTAKE SLAB:**

PROFESSORS / READERS: 14, Asst. Professor (Lecturer) : 16 (Total 30)

**FOR 100 INTAKE SLAB**

PROFESSORS : 14, READERS : 14, Asst. Professor (Lecturer) : 17 (Total 45)

Experience Required:

Professor:- Total teaching experience of Ten years.

Reader:- Total teaching experience of 5 years with PG Degree out of which years teaching experience as Lecturer or eight years with Graduation as Lecturer.

Lecturer:- No teaching experience is required.

**16. PART TIME TEACHERS:-**

Apart from above, one Varma exper, One Traditional Bone setter, one Yoga teacher in the Department of Varma, Puramaruthuvam and eight Consultants of Modern Medicine

	Whether the Teachers or Consultants are available on Part Time basis in the following speciality in addition to above mentioned Teaching Staff.	Available or Not
	Modern Medical Staff:-- 8 -	
1	Medical Specialist	
2	Surgical Specialist	
3	Obstetrician and Gynecologist	
4	Pathologist	
5	Anesthesiologist	
6	Ophthalmologist	
7	Pediatrician	
8	Radiologist.	
9	Dentist	
10	Physiotherapist	
11	X-Ray Technician / Radiographer	

**17. HOSPITAL**

1.	Name and location of the own hospital with address	
2	State the Whether the own hospital situated within the campus	
3	If not, distance between the Hospital and the Study Centre and full address	
4	Furnish Xerox copy of license given by the Government to set up the Hospital.	
5	Total Number of Beds	
6	Whether separate male & female Wards are available	
7	Distribution of Beds(Minimum number of beds in In-Patient Department 1:1 student-bed ratio	
8	Average Bed Occupancy per day	
9	Total number of patient in IPD during the last one year	

10	Number of Out patient section in the Hospital		
11	Furnish details of distribution of bed strength in various specialties in the Hospital		
12	Type of OPD	1. Moalajat (Medicine) 2. Jarahat including Ain, Uzn, Anaf, Halaq wa Asnan 3. Qabalat wa Amraz-e-Niswan 4. Amraze Atfal 5. Araze Jild wa Tazeeniyat 6. Tahaffuzi wa Samaji Tib	
	Type of IP	1. Moalaji including Ilaj bit Tadbeer & Amraz-e Jild wa Tazeeniyat ) 2. Jarahat including Ain, Uzn, Anaf wa Halaq 3. Qabalat wa Amraze Niswan wa Atfal	
13	Average number of patient per day in OPD		
14	Total number of patient in OPD during last one year		
15	Whether separate Pre-Clinical Speciality and Para-clinical specialty available.		
16	To mention whether the facilities like Radiology, Clinical Laboratory, Blood Bank and Operation theatre etc., available in the Hospital.		
17	<b>HOSPITAL STATFF:-</b> Whether the requirement of an Unani College hospital staff are available as per CCIM norms		
18	<b>NON – TEACHING &amp; SUPPORTIVE STAFF:-</b>		

Sl.No	Department	Post	Required	Available	Shortfall
1	Library	Librarian/Assistant Librarian	1		
		Library Attendant or PeonClerical staff for administrative accounts service	1		
2	College Office	Clerical staff for administrative accounts service	4		
3	Kulliyat	Attendant	1		
4	Tashreehul badan	Laboratory Technician	1		
		Museum Keeper	1		

5	Munafeul Aza	Laboratory Technician	1		
		Museum Keeper	1		
6	Ilmul Advia	Laboratory Technician	1		
		Museum Keeper	1		
7	Saida	Dawasaz/Pharmacy Attendant	1		
8	Mahiyatul Amraz	Laboratory Technician	2		
9	Niswan wa Qabalat	Attendant	2		
10	Ilmul Atfal				
11	Tahaffuzi wa Samaji tib				
12	Moalajt				
13	Jarahat				
14	Amraze Ain, uzn, Anf wa Halsq				
15	Ilaj bit Tadbeer				
16	Amraze jild wa Tazeeniyat				
17	Herbal Garden	Gardener	1		
		Multipurpose worker	2		
Note:- The Sweeper, Attendant, Lifter, Laboratory Assistant, Data Entry Operator (DEO), Multipurpose Worker could be on contractual basis.					

**19. CENTRAL LIBRARY  
(As per CCIM Norms)**

1	Working Hours		
2	Total number of Books		
3	Number of Journal	Subscribed:	
		Indian	
		Foreign	
4	Reading Room for Students with capacity		
5	Reading Room for Teaching Faculty with capacity		
6	Photocopying facility		
7	Internet facility		
8	Whether Cataloguing of books done? If yes, system of Cataloguing		



<b>20. EQUIPMENT AND INSTRUMENTS:-</b>		
	Details of Equipment and instruments required in each department Laboratory.  (List to be enclosed)	
<b>21 SECURITY DEPOSIT</b>		
	Details regarding creation of Security Deposit	
<b>22 HOSTEL</b>		
1	Whether permanent hostel building separately for men and women students	
2	If so indicate the No. of rooms available for each	
3	If it is not provided in the same campus where the hostel situated	
4	Furnish the Full address	
5	Distance between college and hostel	
<b>23. PLAY GROUND</b>		
1	Whether play ground facilities are available	
2	If not where the same is provide & furnish the address	
3	Whether the consent obtained from the authority for utilizing the playground (furnish the copy of the same)	
<b>24 FURNITURE</b>		
a)	Adequate furniture for staff	
b)	Adequate furniture for students	
<b>25 CONTSTITUTION OF GOVERNING BODY OF THE COLLEGE:</b>		
A)	The name and designation of the officer of the University who is the member nominated under Statutes 18 (5) of the Unani statutes in the Governing Body of the College.	
<b>25. OBSERVATION OF THE INSPECTION COMMISSION</b>		
	Other specific remarks of the Inspection Commission (The findings should be recorded in a separate sheet annexed to this report)	

**26. COMPLIANCE OF GUIDELINESS:**

a)	Whether the institution has fulfilled all the conditions for BUMS degree course in the Tamil Nadu Dr.M.G.R Medical University Statutes for the Grant of Continuance of Provisional Affiliation to conduct BUMS degree course.	
----	---	--

**27. PAST DEFICIENCIES**

	Details of rectification of past deficiencies observed by the previous year Inspection Commission. (Please furnish remarks item by item in a separate sheet and enclose along with the inspection report)	
--	---	--

SIGNATURE OF THE MEMBER:

NAME IN BLOCK LETTERS: .....

SIGNATURE OF THE CONVENOR:

NAME IN BLOCK LETTERS: .....

PLACE :

DATE :