## Maharashtra University of Health Sciences, Nashik InspectionCommitteeReportforAcademicYear2025-2026

## Clinical Material in Hospital

Name of College/Institute Dr.G.D.Pol Foundation's Institute of Nursing Education Faculty B.Sc Nursing /P.B.B.Sc Nursing.

## **HOSPITALDETAILS**

Sr. No.	Particulars to be verified	Particular	Adequate/ Inadequate
1	The Institute / College shall execute a MoU with any institute for affiliation of hospital in addition to minimum100beddedown/parent Hospital (Affiliatedhospitalmustbe50beddedor more.)  To be made available on web site		Adequate
a.	Whether Hospital is registered under any act under Local Authority such as Corporation, Municipality, Gram Panchayat etc.:  Copy to be made available on web site		Adequate
b.	Student Bed Ratio for UG & PG to be verified:(As per MSR) Calculate at Actual1:3		Adequate
c.	Average Bed Occupancy in %: (Minimum 75%) 80		Adequate
d.	Clinical facilities for PG to be verified:-(As per MSR)		N.A
	<ul> <li>(i) Whether OPD is functioning to be verified</li> <li>(ii) Total No of OPD (on the day of inspection)</li> <li>(iii) Average Number of patients attending OPD(current year)</li> <li>(iv) Average Number of Delivery (Current year)</li> <li>(v) Average Number of abnormal Delivery (Current year)</li> </ul>		Adequate

 If Infrastructure is available, then mark "Adequate" & do not attach any Documents it should be available on college website

• In case of "Inadequate", it must be marked as "Inadequate" with evidence. To be submit to university with report

Here we declare all relevant document uploaded are clear and visible on web site & are true as per my knowledge& Belief
AnyOther,PleaseSpecify:-

Date:- 1 02 2025

Dean/PrincipalStarnp&Signature
INSTITUTE OF NURSING EDUCATION

LINSTITUTIONAL AREA SET BET OF LETC

Chairman of LIC

Member Of LIC