Phone दूरभाष Telegranis

: 25367033, 25367035, 25367036 : 25367033, 25367035, 25367036

Telegranis : MEDCONCIND, New Delhi-75 तार : मेडकॉसिंड नई दिल्ली

Fax E-mail Website : 0091-11-25367024 : mci@bol.net.in : 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 "MEDICAL COUNCIL OF INDIA"

G.B ITEM NO. 279 (26-27/03/2015) No. MCI-273(22)/2015-Med./

Date:

The Secretary to the
Govt. of India,
Ministry of Health & Family Welfare,
Nirman Bhawan,
New Delhi-110011

Sub: H. N. B Garhwal University, Uttarakhand - Recognition of MD(Anatomy) qualification in respect of students being trained at Shri Guru Ram Rai Institute of Medical & Health Sciences, Dehradun.

Sir/ Madam,

I am to state that the General Body of this Council at its meeting held on 26-27/03/2015 considered the Council Assessor's Report (05.05.2014) on the physical and other teaching facilities available at Shri Guru Ram Rai Institute of Medical & Health Sciences, Dehradun for the award of MD(Anatomy) qualification under H. N. B Garhwal University, Uttarakhand. The Council approved the following recommendations of the Postgraduate Medical Education Committee, which I am directed to convey herewith for your information and necessary action:

"The Postgraduate Committee considered the Council assessor's report (05.05.2014) and decided to recommend that MD(Anatomy) qualification granted by H. N. B Garhwal University, Uttarakhand in respect of students being trained at Shri Guru Ram Rai Institute of Medical & Health Sciences, Dehradun be recognized and included in the 1st Schedule to the I.M.C. Act, 1956 for 2 (Two) seats per year.

The Postgraduate Committee further decided that the recognition so granted shall be for a maximum period of 5 years from the date of notification upon which the institute shall have to apply for renewal of recognition. Failure to seek timely renewal of recognition as required shall invariably result in stoppage of damission to the postgraduate course."

You are therefore requested to notify the above qualification at the earliest.

A copy of assessment report is enclosed herewith.

Date/ year of starting the course: 2011
Date/ year of examination of first batch: 2014

Yours faithfully,

(Bonny Harison) Section Officer

Encl.: As above.

Endst. No. MCI-273(22)/2015-Med. \\ 3856

Date: 03/06/2015

Copy together with a copy of assessment report is forwarded for information and necessary action to:-

1. The Dean/ Principal, Shri Guru Ram Rai Instt. of Medical & Health Sciences, Shri Mahant Indiresh Hospital, Patel Nagar, Dehradun - 248001, Uttarakhand.

2. The Registrar, Hemwati Nandan Bahuguna Garhwal University, Srinagar (Garhwal),

3. Director General, Directorate of Mod. Health Uttararchal, Chandan Nagar, Dehradun-248001, Uttarakhand.

(Bonny Harison)

8