13/04/16

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ार : गुरुळासिंड नई दिल्ली Fax : 0091-11-25367024 E-mail : mci@bol.net.in

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पॉकेट - 14, सेक्टर - 8, हारका फेस- 1 नई दिल्ली-110 077 Pocket- !4, Sector- 8 Dwarka Phase - I New Delhi-I10077

## भारतीय आयुर्विज्ञान परिषद् MEDICAL COUNCIL OF INDIA

G.B ITEM NO. 91 (30/03/2016)

No. MCI -100(22)/2016-Med./

Date:

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

Sub: North-Eastern Hill University, Meghalaya - Recognition of DM(Cardiology) qualification for 2 seats in respect of students being trained at North Eastern Indira Gandhi Regional Institute of Health & Medical Sciences, Shillong.

Sir/ Madam,

I am to state that the General Body of this Council at its meeting held on 30/03/2016 considered the Council Assessor's Report (July, 2015) on the physical and other teaching facilities available at North Eastern Indira Gandhi Regional Institute of Health & Medical Sciences, Shillong for the award of DM(Cardiology) qualification for 2 seats under North-Eastern Hill University, Meghalaya. 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 Medical Education Committee considered the Council Assessor's Report (July, 2015) and decided to recommend to the Central Government that DM(Cardiology) qualification for 2 seats granted by North-Eastern Hill University, Meghalaya in respect of students being trained at North Eastern Indira Gandhi Regional Institute of Health & Medical Sciences, Shillong be recognized and included in the 1st Schedule to the I.M.C. Act, 1956.

The Postgraduate Medical Education 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 admission to the Postgraduate Course."

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

10

A copy of assessment report is enclosed herewith.

Date/ year of starting the course: 2010
Date/ year of examination of first batch: 2015

Rubaullo.

Yours faithfully,

(Dr. Seema Madan) Consultant (P.G.)

Encl.: As above.

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## भारतीय आयुर्विज्ञान परिषद् MEDICAL COUNCIL OF INDIA

Endst. No. MCI -100(22)/2016-Med. | COST

Date: OS/4/6

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

The Dean/ Principal, North Eastern Indira Gandhi Regional Institute of Health & Medical Sciences, Director's Block, Mawdiangdiang, Shillong-793018, Meghalaya

2. The Registrar, North-Eastern Hill University, Nehu Campus, Shillong-793022, Meghalaya

3. Computer Section of the Council for uploading on MCI website.

(Dr. Seema Madan) Consultant (P.G.)