

Rajiv Gandhi University of Health Sciences, Karnataka

4th 'T' Block Jayanagar, Bangalore – 560041

Website: www.rguhs.ac.in Phone: 080-26761933

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INSPECTION PROFORMA FOR NURSING 2025-26 AY

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. SURESH. S. KANAKANNAYAR.	Dr. S.R. Jeyannalath	Prof. KALA SUNEETHA
Designation	RE. PROFESSOR & ORG. RMCRA	Professor, Dept. FMT KIMS, Bangalore.	Professor, CUM HOD PADMAHREE INSTITUTE OF NURSING
Address	G-5, I I HR CAMPUS Quater, Heasghatta Lake Post, B'lore.	102, Padmanabhaiah Bangalore - 70	# 46, Padmaashree Campus Suli Keri Post, Kommaghatta Kengeri, Bangalore
Mobile No	9448033228	9886334494	9829616332
Email ID	kanakannaya@gmail.com	Dr. S.R. Jeyannalath@gmail.com	Suneemsc2009@gmail.com

Inspection For the Academic Year : 2025-2026

Date of Inspection: 12/08/2025

(Please Tick the Appropriate Boxes Below)

Type of Inspection:	1. Fresh Affiliation		4. Re-Inspection	
	2. Continuation of Affiliation	✓	5. Surprise Inspection	
	3. Enhancement of Seats		6. Change of Name/Address	
	7. Additional Course (M.Sc Nursing) only.			

Nursing Programme Under Inspection:	1. Basic B.Sc. Nursing	✓	2. Post Basic B.Sc. Nursing	✓
	3. M.Sc. Nursing	✓	4. M.Sc. NPCC	--

1	Name of the Institution with Full Address	DR.M.V.SHETTY COLLEGE OF NURSING VIDYANAGAR, PANJIMOGARU POST, KULUR MANGALORE-575013. D.K	2	Year of Establishment	1987
2	Status of the course conducting body	Government / University / Autonomous / Municipal Corporation / Missionary / Trust / Society / Company			
3	(a). Name of the Trust/Society & complete postal address & Phone number	DR. M.V.SHETTY MEMORIAL TRUST ® (Enclose copy of Registration documents of Society/Trust) Annexure - 1 copy enclosed			
		Email: nursing@mvshettycolleges.edu.in	Website: www.mvshettycolleges.edu.in		
		Office No: 0824-2481048	Mobile No: 8951179757		

Signature of Chairman

Dr. SURESH. S.
KANAKANNAYAR

Signature of Member (1)

Dr. S.R. Jeyannalath

Signature of Member (2)

MM. KALA SUNEETHA

(b). Name of the president/Secretary/Chairman of Trust/Society & Phone No	DR.PROF.HIMA URMILA SHETTY		
4 Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : (Enclose copy of Governing Council Members & Audit report of Society/Trust) <i>COPY enclosed</i> Annexure - 2		
5 a) Details of Principal/Head of the institution (After MSc)	Name: DR.PADMA PRIYA S Qualification: M.PHIL NURSING., Ph.D NURSING Experience after MSc: 20 years Email: sashwaya79@rediffmail.com	Mobile No: 9481247652 Office No: 0824-2481048 Fax No: -- Residential phone No: --	
b) Drawing authority of the college	DR. DIVYANJALI SHETTY		
6 Do you have any other nursing institution other than the current institution mentioned above under the same trust?	YES ☐	NO ☒	If yes, Specify the full name of the nursing institution with full address Verify with the original TRUST document. (Verify & enclose a copy of the registered trust Documents) <i>NA</i> Annexure - 3

7. Affiliation Fee Paid Details:

COPY enclosed. **Annexure - 4**

Course Applied UG Courses	Continuation / Fresh Affiliation	Particulars of fees paid for				Amount
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UG or b) for UG and PG courses c) NPCC	
B.Sc. Nursing	351050.00	Enclosed			25000.00	251,050.00
Post Basic B.Sc. Nursing	1,31,050.00	Enclosed				1,31,050.00
Total (A)						
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation		No of Seats X Prescribed fees of each faculty			
	1.					
	2.					
	3.	Enclosed				
	4.					
	5.					
Total (B)						
NPCC	--					
Total (C)						68550.00
Grand Total (A+B+C)						5,50,650.00

Online Transaction Number or Details:

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Remarks:

totally Rs 5,50,650/- paid for
Helinet + BSc + DBSc + MSc.

Verify & Enclose copy of Affiliation fee paid documents

8. Approval Status of the Institution & Sanctioned Intake:

Name of the Course	Intake Approved and Admitted	GOK	RGUHS	KSNC	INC	Remarks
Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	5, 6, 7, 8;
	Affiliation Sanctioned Intake	COPY enclosed	COPY enclosed	COPY enclosed	COPY enclosed	COPY enclosed
	Admissions Made for the Current Academic Year		Enclosed			
Post Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake	COPY enclosed				
	Admissions Made for the Current Academic Year		Enclosed			Sanctioned COPY enclosed
M.Sc. Nursing in a. Community Health ☐ b. Medical Surgical ☐ c. OBG ☐ d. Paediatric ☐ e. Psychiatry ☐	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake		Enclosed			
	Admissions Made for the Current Academic Year					Sanctioned COPY enclosed
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

	Sanctioned Intake		NILL			
	Admissions Made for the Current Academic Year					

9. Total No. of Students under Training in each of the Nursing Education Programme:

Programme		I year	II Year	III Year	IV Year	Total
B.ScNursing	Male	18	15	17	16	66
	Female	62	63	63	62	250
Post Basic B.Sc Nursing	Male	1	0			1
	Female	34	8			42
M.Sc Nursing	Male	1	0			1
	Female	2	0			2
M.Sc NPCC	Male	0	0			0
	Female	0	0			0

10. If the college has PBBSc(N) following details of the admitted students to be enclosed (physical verification to be done with original documents)

copy enclosed

Annexure - 9

Sl. No	Name of the Student	Nursing Council Registration Number	Residence Address	Place & Address of work at the time of admission (verify with experience certificate and relieving order)	Board / University from where last exam was qualified	Duration of Course with dates From----- To-----
		<i>copy</i>	Enclosed			✓

Note: Separate list to be enclosed and Biometric attendance to be verified and copy to be attached.

11.If the college has MSc(N) following details of the admitted students to be enclosed (physical verification to be done with original documents)

copy enclosed

Annexure -10

Sl. No	Name of the Student	Nursing Council Registration Number	Residence Address	Place & Address of work at the time of admission (verify with experience certificate and relieving order)	Board / University from where last exam was qualified	Duration of Course with dates From----- To-----
	<i>copy enclosed</i>		Enclosed			✓

Note: Separate list to be enclosed and Biometric attendance to be verified and copy to be attached.

Ref: F.No.1-6/LT/2022-INC dtd 23.03.2022&RGU/ADM/CIR/01/2017-18 dtd 25.03.2017

Remarks: *BS (80) PBS (35) & MSc (30) winged*

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

12. Teaching Faculty Requirements for all Nursing Programs:

12. Planning Faculty Requirements for all Nursing Programs.																	
Sl. No	Designation	Required								Existing / Available				Deficit			
		B.Sc (N)					P.B. B.Sc (N)	M.Sc (N)*	M.Sc NPCC	B.Sc (N)	P.B. B.Sc (N)	M.Sc (N)	NPCC	B.Sc (N)	P.B. B.Sc (N)	M.Sc (N)	M.Sc NPCC
		40 to 60	61 to 100	101 to 150	151 to 200	201 to 250	20 to 60										
1	Principal	1	1							1	--	--		2			
2	Vice-Principal	1	1							0	--	--		2			
3	Professor	1	1-2					1*		2	--	--		2			
4	Associate Professor	2	2-4					1*		3	--	--		2			
5	Assistant Professor	3	3-8				2	3*		5	--	--		2			
6	Tutor	8-16	16-24				2-10	--		35	--	--		2			
	Total	16-24	24-40				4-12			46				2			

For Example: For 40 Students Intake minimum number of teachers required is 16 including Principal, i.e., Principal - 01, Vice Principal - 01, Professor - 01, Associate Professor - 02, Assistant Professor - 03, and Tutors- 08

Note:1) Institute shall have sections of 100/60 students (Maximum number of students 100 per section)

2) 1:10 teacher student ratios shall be ensured.

3) 1:3 student patient ratio in the clinical areas prescribed in the syllabus shall be adhered.

4) Physical facilities including laboratories and having additional hospital(s) should be increased as per norms.

(The Faculty and Student Ratio is 1:10 and *For M.Sc. Nursing: Depends on Speciality offered and ratio remains same i.e., 1:5 if they offer B.Sc Nursing Program)

Year Wise Distribution of Faculty for B.Sc Nursing :

(Start the Program i.e. for 1st Year, minimum 3 M.Sc. Nursing qualified faculty shall be appointed.)

Intake	1 st Year	2 nd Year	3 rd Year	4 th Year
40 Students Intake	Total 5 Faculty * 3 M.Sc. Nursing qualified faculty * 2 Tutors	Total 8 Faculty * 5 M.Sc. Nursing qualified faculty * 3 Tutors	Total 12 Faculty * 7 M.Sc. Nursing qualified faculty * 5 Tutors	Total 16 Faculty * 8 M.Sc. Nursing qualified faculty * 8 Tutors
60 Students Intake	Total 6 Faculty * 3 M.Sc. Nursing qualified faculty * 3 Tutors	Total 12 Faculty * 5 M.Sc. Nursing qualified faculty * 7 Tutors	Total 18 Faculty * 7 M.Sc. Nursing qualified faculty * 11 Tutors	Total 24 Faculty * 8 M.Sc. Nursing qualified faculty * 16 Tutors
100 Students Intake	Total 10 Faculty * 5 M.Sc. Nursing qualified faculty * 5 Tutors	Total 20 Faculty * 8 M.Sc. Nursing qualified faculty * 12 Tutors	Total 30 Faculty * 12 M.Sc. Nursing qualified faculty * 18 Tutors	Total 40 Faculty * 16 M.Sc. Nursing qualified faculty * 24 Tutors
150 students intake				
200 students intake				

Signature of Chairman

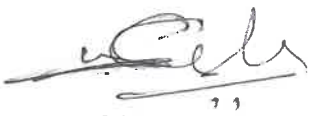
Signature of Member (1)

Signature of Member (2)

250 students				
* Aadhar based biometric attendance for students				

copy enclosed

copy enclosed



Signature of Chairman



Signature of Member (1)



Signature of Member (2)

12.1. Teaching Faculty details: – Details should be written in format only.

Sl. No	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNK Reg. Number	Teaching experience		Date of joining	Form -16 Submitted (Yes/No)	Signature of Faculty
						After UG	After PG			
1.	Dr. Padma Priya S.	Principal	M.Phil Nsg,Phd Nsg	2006	RRTMN2006298 KAR	3 Years	21 yrs	16/06/2022	Yes	
2.	Mrs. Savitha B.	Prof	M.Sc-MHN	2014	13683	3yrs 4 months	10yrs 78 mns	01/08/2014	Yes	
3.	Mrs. Anupama H.V.	Assoc. prof	Msc-Child Health Nsg	2015	47357	1 yrs	9 yrs	06/02/2019	Yes	
4.	Mrs, Susan Thomas	Assoc. prof	Msc-Child Health Nsg	2015	1824	2 yrs	9 yrs	02/12/2019	Yes	
5.	Ms. Shamala K.S.	Assoc. prof	Msc-Medical Surgical Nsg	2016	25158	5 yrs	8 yrs 5 months	02/11/2016	Yes	
6.	Mrs. Supriya K.C. Naik	Asst. prof	Msc-Medical Surgical Nsg	2016	44393	3 yrs	8 yrs	03/03/2021	Yes	
7.	Mrs. Lavina Jyothi D.Mello	Asst. prof	Msc-Medical Surgical Nsg	2016	13009	1 year	7 yrs	06/11/2022	Yes	
8.	Mrs. Seeniya Alex	Asst. prof	Msc- OBG Nsg	2015	18402	2 yrs 7 months	7 years 5 month	04/11/2024	Yes	
9.	Mrs. Priya V	Asst. prof	Msc- OBG Nsg	2019	--	3 yrs	4 yrs	10/04/2025	No	
10.	Mrs. Anu Mathew	Asst. prof	Msc- OBG Nsg	2013	49501	4 yrs 6 months	4 yrs.6 month	17/03/2025	No	
11.	Ms.Leena Dsouza	Lecture	MSc-MHN	2024	72425	4 Years	1 Year	01/07/2024	Yes	
12.	Mrs.Aishwarya	Lecture	Msc-Child Health Nsg	2022	111161	--	1 Year	18/04/2024	Yes	
13.	Mrs. Relina Saldhana	Lecture	Msc-Medical Surgical Nsg	2024	96756	1 yrs	--	03.03.2025	No	
14.	Mrs. Shruthi tellis	Lecture	Msc-Community	2023	73568	1 year	1 yr 3 months	07.05.2024	Yes	
15.	Mrs. Anju prasad	Lecture	Msc-Community	2010	1862	3 yr 6 months	1 yr 5 months	28.8.2024	Yes	
16.	Mrs. Diana Dsouza	Lecture	MSc-MHN	2024	12078	2 yr 6 months	11 months	02.09.2024	Yes	

Signature of Chairman'

Signature of Member (1)

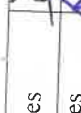
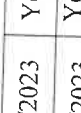
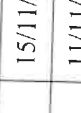
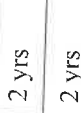
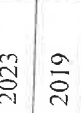
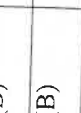
Signature of Member (2)

17.	Mrs. Agnes Maria	Asst Lecturer	B.Sc (PB)	2010	16194	13 yrs 10 months	--	01/06/2023	Yes	
18.	Mrs. B. K Reshma	Tutor / Clinical Instructor	B.Sc (B)	2024	167356	4 months	--	01.04.2025	No	
19.	Ms. Jessica Edward	Tutor / Clinical Instructor	B.Sc (B)	2024	167353	4 months	--	03.03.2025	No	
20.	Ms. Nidhi Poojary	Tutor / Clinical Instructor	B.Sc (B)	2025	171840	4 months	--	05.05.2025	No	
21.	Ms. Radhika L H	Tutor / Clinical Instructor	B.Sc (B)	2024	172633	4 months	--	07.05.2025	No	
22.	Ms. Roopa	Tutor / Clinical Instructor	B.Sc (B)	2025	172647	4 months	--	21.05.2025	No	
23.	Mr. Charan Kumar Y L	Asst Lecturer	B.Sc (B)	2013	148758	3 yrs	--	17.08.2022	Yes	
24.	Mrs. Ramya Chandra	Tutor	B.Sc (B)	2012	43604	15 yrs	--	02/05/2012	Yes	
25.	Mrs. Revathi	Asst Lecturer	B.Sc (PB)	2019	179606	4 yrs	--	09/02/2021	Yes	
26.	Mr. Ravindra Kulal	Asst Lecturer	B.Sc (PB)	2016	47284	3 yrs	--	18/07/2022	Yes	
27.	Mr. Shrivana S. Suvarna	Asst Lecturer	B.Sc (PB)	2011	1111370	3 yrs	--	03/08/2022	Yes	
28.	Mr Subhas B X	Tutor	B.Sc (B)	2011	043647	2 years 11 months	--	02/12/2022	Yes	
29.	Mrs. Jeslitha Denzy Dsouza	Tutor	B.Sc (B)	2019	98767	2 yrs 11 months	--	06/12/2022	Yes	
30.	Mr Madanna Wadeyar	Tutor	B.Sc (B)	2020	108838	3 yrs	--	05/01/2022	Yes	
31.	Mrs. Josini K P	Tutor	B.Sc (PB)	2012	82147	2 yrs	--	12/12/2022	Yes	
32.	Mrs. Shivaprasad	Asst Lecturer	B.Sc (PB)	2016	177216	4 yrs	--	12/03/2021	Yes	
33.	Mr. Santhosh Naik	Asst Lecturer	B.Sc (PB)	2011	145489	3 yrs	--	22.09.2022	Yes	
34.	Mr. Sharabbayya S	Tutor	B.Sc (B)	2020	108315	2 yrs	--	01/12/2022	Yes	
35.	Mrs. Lakkavva	Tutor	B.Sc (B)	2020	108804	1 year 7 Months	--	16.01.2024	Yes	
36.	Mr. Sadashiva	Tutor	B.Sc (B)	2021	119955	2 yrs	--	06/03/2023	Yes	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

37.	Ms. Ealisyia Jiya	Tutor	B.Sc (B)	2023	147183	2 yrs	--	15/11/2023	Yes	
38.	Ms. Akshitha Sonia lobo	Tutor	B.Sc (B)	2019	96227	2 yrs	--	11/11/2023	Yes	
39.	Mr. Basuragi sanjunath	Tutor	B.Sc (B)	2020	108990	2 yrs	--	05.04.2023	Yes	
40.	Mr. Basavaraj kariyappa Sankad	Tutor	B.Sc (B)	2020	108320	2 yrs	--	31/01/2023	Yes	
41.	Mr. Ravi nadyal	Tutor	B.Sc (B)	2020	108827	2 yrs	--	20/01/2023	Yes	
42.	Mr. veerupaksha	Tutor	B.Sc (B)	2020	108312	2 years	--	20/02/2023	Yes	
43.	Mr. Karthik A	Tutor	B.Sc (PB)	2022	21254	3 years	--	05/11/2022	Yes	
44.	Ms. Josmine Crasta	Asst Lecturer	B.Sc (B)	2020	100341	4 years	--	15.10.2020	Yes	
45.	Mr. Ravi Ashok Hadimani	Tutor / Clinical Instructor	B.Sc (B)	2019	99875	0	--	01.08.2025	No	
46.	Ms. Spoorthi	Tutor / Clinical Instructor	B.Sc (B)	2025	172648	3 months	--	02.06.2025	No	

- **Note :** Identity of faculty to be verified with Govt approved ID to be verified (Aadhar/ Voter Id /PAN card/Driving Licence). Principal cum Professor- Essential Qualification: M.Sc. (Nursing) Experience: M.Sc. (Nursing) having **total 15 years experience with M.Sc. (Nursing) out of which 10 years after M.Sc. (Nursing) in collegiate program.** Ph.D. (Nursing) is desirable For Msc Nursing and NPCC programme there should be full time Research Guides available which needs to be verified with the original Guideship letters.(Student Guide ratio to be verified as per norms of RGUHS)
- If required attach same extra pages.



Signature of Chairman



Signature of Member (1)



Signature of Member (2)

PE = Photo enclosed

13. Particular of External Teachers (Part time) - Attach a separate sheet with this proforma. Annexure - 11

Sl.No.	Name	Qualification	Subject	Number of Hours per Year	Remarks
		Enclosed			

14. Physical Facilities :

14.1. College Building:

copy enclosed Annexure - 12

S. No	Details	Required	Existing	Verified by LIC team
1	Built – up area of the building (in Sq. Ft)	23,200sq.ft (40 – 60 intake)	√	
	Note: The 23,200sq.ft only for B.Sc Nursing programme with 40-60 intake. (The gazette of India extraordinary part III— section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.)/EC Copy/Rental Agreement registered copy			
2	CLASSROOMS Size of each classroom (sq ft) for 40 to 60 intake B.Sc (N): 900 sq ft	4 Class rooms 900sq ft Each	√	verified PE
	P.B.B.Sc (N) : 600 sq ft	2 Class rooms 600sq ft Each	√	verified PE
	M.Sc (N) : 600 sq ft	2 Class rooms 600sq ft Each	√	verified PE
	NPCC : 600sq ft	2 Class rooms 600sq ft Each	--	NA
3	Administrative Facilities			
	Office			
	1. Principal's Chamber	300	√	verified PE
	2. Vice-Principal Chamber	200	√	verified PE
	3. HOD	5 x 200 = 1000	√	verified PE
	4. Professor/Assoc. Prof	800+2400=3200	√	verified PE
	5. Lecturer/ Tutors			
	Institution office /Others			
	6. Office of Administrative, clerical staff and PA (s)	600	√	verified PE
	7. Accountants Office	100	√	verified PE
	8. Store Room	100	√	verified PE
	9. Record room	100	√	verified PE
	10. Room for maintenance staff	100	√	verified PE
	11. Xeroxing room	100	√	verified PE
	12. common room (Girls & Boys)	600+400= 1000	√	verified PE
	13. Multipurpose hall / Seminar hall/ examination hall	3000	√	verified PE
	14. Toilets	1000	√	verified PE

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

1.5. A.V/Aids room	600	✓	PE: Photo enclosed verified PE
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S. No	Details	Required	Existing	Verified by LIC team
4	LABORATORIES	(40-60 intake)		
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	✓	verified PE
	Nutrition & Community Health Nursing	1200sq.ft	✓	verified PE
	Obstetrics and Gynecology Laboratory	900sq.ft	✓	verified PE
	Pediatrics Nursing Laboratory	900sq.ft	✓	verified PE
	Pre-Clinical Sciences Laboratory	900sq.ft	✓ (Skill Lab)	verified PE
	Computer Lab (1: 5 computer :student)	1500sq.ft	✓	verified PE

Note:

- One large skill lab/simulation lab can be constructed consisting of the labs specified with a total of 5500 sq.ft.size or can have five separate labs in the college.
- At least 10-12 sets of all items needed. Simulators for advance skills e.g., administration of tube feeding, tracheostomy, gastrostomy, I/V injection, BLS, newborn resuscitation model, etc.
- The laboratory should have computers, internet connection, monitors and ventilator models/manikins/ simulators for use in Critical Care Units.
- For NPCC programme there should be Simulation lab with High fidelity Mannequins and task trainers available.
- Each classroom size-900sq for 40-60 student intake & proportionately the size of the built-up area will increase/decrease according to the number of seats approved.

Classrooms and Laboratories (Verify & attach a copy of Building Plan approved by competent authority with building completion certificate)

Building Documents:

Annexure – 12

SL NO	Particulars	Verified by the LIC team
1	Registered documents in sub registrar office	verified
2	Is the college building own or leased ?	verified
3	Blue print of the building plan approved and attested by competent authority.	verified
4	Building construction license from competent authority	verified
5	Tax paid receipt (Latest / current year)	verified
6	Occupancy certificate.	verified
7	Sale deed / Lease deed of the building / Land.	verified
8	Land Conversion order from DC	verified
9	Town planning/Authorities approval order	verified

It is mandatory to enclose all the documents mentioned above.

Note:

- If the institution doesn't have own building even after 2016 withdrawal of affiliation will be initiated. (F.NO.1-5/2014-INC dtd 29/10/2014).
- It is mandatory that **all nursing institution** shall have its own building within two years of its establishment


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

- If one of the trustee/member/directors of the Trust/Society/Company desires to lease the building owned by him for nursing program, it should be for a period of 30 years registered in sub registrar office. [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020} 5th July, 2021 F.NO. 11-1/2019-INC.)
- Google location of college to be attached by LIC team.
- Registered lease document in sub registrar office to be submitted.

15. Vehicle Details : Enclose a copy of RC Book / Insurance / Driving License

COPY Enclosed

Annexure - 13

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving Lience
<i>COPY</i>	Enclosed		Yes / No	Yes / No	Yes / No

16. Library facility : Enclose list of library books

COPY enclosed

Annexure - 14

Library Facilities	Existing Size in Sq ft	Separate Library	Ventilation	Lighting	Verified by LIC team
Required 2300 Sq.Ft	<i>2300 Sq.Ft.</i>	YES ☒ No ☐	YES	YES	<i>Verified</i>
Total No. of Nursing Books available	4080 ✓	No. of Nursing Journals subscribed		04 ✓	
No. of Thesis/Research titles available	247 ✓	Is internet facility available for Students?		YES ✓	
No of e-books	0 ✓	How many books were purchased in last financial year?		10 ✓	

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	Mrs. Chandra Leela	MLISC ,MA	11 Years	
2	Mrs. Disha	DILS	2 Years	
3	Mrs. Bhuvenswari	DILS	24 Years	
4	MRS. USHALATHA	SSLC	25 Years	

Note : A minimum of 500 different subject titled nursing books (all new editions), in the multiple of editions, total of minimum 3000 books for all batches; 3 kinds of nursing journals, 3 kinds of magazines, 2 kinds of newspapers and other kinds of current health related literature should be available in the library (for 40-60 intake)& proportionately number of titles of books and journals will increase/decrease according to the number of seats approved.

17. Academic activities : Enclose the details of past 3 years

Annexure - 15

Academic activities	Particulars	Remarks
Research Projects	Descriptive, pre experimental & Correlation	<i>Verified</i>

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Conferences conducted	Enclosed	COPY enclosed
Conferences attended	Enclosed	COPY enclosed

* Colleges should declare & attest tobacco free/drugs free campus (self declaration from to be submitted)

18. Details of Clinical / Hospital Facilities :

Annexure - 16

1	Do you have parent Medical College?	YES ☐	NO ☒
2	Do you have parent hospital?	YES ☒	NO ☐
	If Yes, Hospital Owned by	i. Trust/Society/Missionary ☒	
		ii. Trust member with MOU ☒	

Parent Hospital.		Total No. Beds	Distance from the college	Occupancy on the day of inspection (min 75%)	Verified by LIC team
Full Name & Address of the Parent Hospital 1.Dr.M.V. Shetty Hospital		40	10	80%	verified PE
NAME OF THE TRUST/ Person owning The Hospital Dr.M.V. Shetty Memorial Trust ®		--	--	--	verified PE
Name Of The Owner Of The Trust of Hospital Dr.Prof.Hima Urmila Shetty		--	--	--	verified PE
Affiliated hospitals- Full Name & Address of the Parent Hospital	1 Wenlock Dist. Hospital	743	9 km	98%	verified PE
	2 Govt.Lady Gochen Maternity Hospital	260	9 km	96%	verified PE

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	3 . Wenlock Govt Hospital(RAPCC)	160	9 km	96%	<i>clear</i>
	4. Father Muller Psychiatric Hospital	153	9 km	95%	<i>clear</i>
	5 Mangalore Institute of Oncology (MOU/Clinical permission letter)	122	8 km	90%	<i>copy enclosed</i>

(Mention the number of beds, verify the original documents of proof regarding the ownership of hospital and the number of beds with KPMEA and Pollution control board certificate, also verify the details in online website of KSPCB & KPMEA notifying the same).

NOTE:

- If the college established, i.e., **2012-13 and before** (before 2013 -14) parent hospital rule is not applicable (F.NO.1-5/2014-INC).
- Colleges established since **2013-14** shall have 100 bedded parent hospital for opening new B.Sc Nursing Programme. But central /state govt institutions can have clinical affiliation with govt hospitals and having parent hospital is not applicable. Other specialties/facilities for clinical experience required are;-OT, Eye/ENT, Burns &Plastic, Neonatology, Communicable disease, cardiology, oncology, Neuro, Nephro, ICU/ICCU. (Reference :F.NO.1-5/2014-INC dtd 29/10/2014 and F.NO.1-6/2018-INC dtd 20/04/2018).
- With effect from 2022-23 AY, Nursing colleges for **Bangalore Urban and Mangalore city** should have **200 bedded Unitary/Singleallopathic parent/own hospital**. This hospital should continue to function as parent hospital 'till the life of the nursing institution and not allow the hospital to be treated as Parent/Affiliated Hospital' to any other nursing institution and will be for minimum 30 years. (Registered MOU to be submitted in this regard). Both the college building and the parent hospital should be owned by the same trust. (Reference: The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020} 5th July, 2021 F.NO. 11-1/2019-INC.)
- In addition to parent hospital, to offer clinical experience/specialties the students should be sent to affiliated hospital/agencies/institutions where it is available with minimum of 50 beds. The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020} 5th July, 2021 F.NO. 11-1/2019-INC.)

Note

- Verify the original KPMEA documents, pollution control certificate of the hospitals to prove the ownership of the hospital and the number of beds
- Verify the MOU(undertaking) between trust member (owner of the hospital) and the trust [i.e., signed by all trustees/members/directors of Trust/Society/ Company]. owning the nursing institution with the clause to the effect that the trustee/member/director of the Trust/Society/ Company would not allow the hospital to be treated 'Parent/Affiliated Hospital' to any other nursing institution and will be for minimum 30 years.

Verify & Attach Clinical permission letter, fee paid receipts.

Remarks:

Parent hospital, affiliated hospitals, (Government hospitals) and 2 private hospitals copies attached.

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

18.1. Distribution of Beds

*Excluded for 12/08/25
COPD for last 2 months enclosed*

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	40	12	} 736	330
Surgery including OT		2		180
Obstetrics & Gynecology		0	272	260
Pediatrics,		0	160	30
Emergency Medicine		0	18	15
Psychiatry		0	99	85

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	2	2	8	5
Minor OT	0	0	5	4
Dental, Otorhinolaryngology, Ophthalmology	0	0	0	0
Burns and Plastic	0	0	0	0
Neonatology care unit	0	0	0	0
Communicable disease/Respiratory medicine/TB & chest diseases	0	0	0	0
Dermatology	0	0	0	0
Cardiology	0	0	0	0
Oncology	0	0	0	0
Neurology/Neuro-surgery	0	0	0	0
Nephrology/Urology	0	0	0	0
ICU/ICCU	0	0	65	65
Geriatric Medicine	0	0	0	0
Any other	0	0	0	0

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Note: 1:3 student patient ration needed. Verify and attach details of previous month.

19	COMMUNITY HEALTH NURSING :Annexure - 17		
RURAL FILELD			
a. Name of CHC / PHC / SC			
Adopted / Affiliated			
Administrated by		State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute		3 kms	
b. Services Rendered by Health & Family Welfare Programmes			
URBAN FEILD :			
a. Name of CHC / PHC / SC		SURATHKAL PHC	
Adopted / Affiliated		AFFILIATED ✓	
Administrated by		State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute		10	
b. Services Rendered by Health & Family Welfare Programmes		ANTINATAL CARE POSTNATAL IMMUNIZATION IMPLEMENTATION OF F P METHODS	
N.B.: A copy of the agreement for affiliation to the hospital and Health Centers to be attached.			

20	Master Rotation Plan : Annexure - 18 <i>copy enclosed.</i>		
a.	Basic B.Sc. Nursing	YES ☒	NO ☐
b.	Post Basic B.Sc. Nursing	YES ☒	NO ☐
c.	M.Sc. Nursing	YES ☒	NO ☐
21	Time Table available for all Nursing Programmes		
a.	Basic B.Sc. Nursing	YES ☒	NO ☐
b.	Post Basic B.Sc. Nursing	YES ☒	NO ☐
c.	M.Sc. Nursing	YES ☒	NO ☐

22	Records of Students : Are the following students records are maintained well?		
a.	Admission record	YES ☒	NO ☐
b.	Daily Attendance Registers	YES ☒	NO ☐
c.	Health Records	YES ☒	NO ☐
d.	Clinical and field experience record	YES ☒	NO ☐
e.	Practical record books - procedure record	YES ☒	NO ☐
f.	Practical record books - Midwifery case book	YES ☒	NO ☐

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

g.	Leave record	YES ☒	NO ☐
----	--------------	---	-----------------------------

h.	Extracurricular activities of students	YES ☒	NO ☐
i.	Cumulative record of each	YES ☒	NO ☐
j.	Course planning of each subject	YES ☒	NO ☐
k.	Rotation plans	YES ☒	NO ☐
l.	Committee Meetings	YES ☒	NO ☐
m.	Affiliation records	YES ☒	NO ☐
n.	Records of Stock	YES ☒	NO ☐
o.	Annual report of activities and achievements	YES ☒	NO ☐
p.	Staff development programmes	YES ☒	NO ☐
q.	Anti ragging committee	YES ☒	NO ☐
r.	Student welfare committee	YES ☒	NO ☐
s.	POSHE Committee	YES ☐	NO ☒
t.	Prevention of Gender harassment committee	YES ☒	NO ☐

copy enclosed

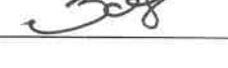
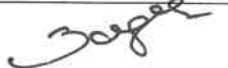
23	Hostel Facilities :Annexure - 12		
a.	Whether the college is having a separate Hostel?	YES ☒	NO ☐
b.	Built-up area of the Hostel	Sq.ft 15000 sq.ft.	
c.	Is the Hostel Owned or Rented/Leased?	Own ☒ (1No)	Rented/Leased ☒ (3nos)
d.	Is there separate provision of Hostel for Male and Female Students?	YES ☒	NO ☐
e.	Total No. of students in the hostel	Girls : 324	Boys : 1024
f.	Total No. of rooms	Girls : 54	Boys : 10
g.	Water Supply	YES ☒	NO ☐
h.	Electricity Supply	YES ☒	NO ☐
i.	Is Facilities available for outdoor games and indoor games?	YES ☐	NO ☒
j.	Is Sick room available?	YES ☒	NO ☐
k.	Whether the hostel mess is available with	YES ☒	NO ☐
l.	Safe drinking water facilities	YES ☒	NO ☐

[Signature]
Signature of Chairman

[Signature]
Signature of Member (1)

[Signature]
Signature of Member (2)

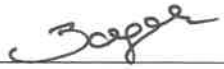
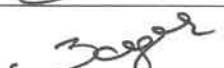
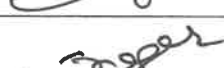
List of Annexures:

Annexure Numbers	Details	Verified as per originals documents		Signature
		Yes	NO	
Annexure - 1	Details of Trust/ Society related documents	√		
Annexure - 2	Details of Governing Council, its meetings & Audit report of Trust	√		
Annexure - 3	Details of any other Nursing Institution under the same Trust		√	
Annexure - 4	Details of Affiliated fees paid receipts	√		
Annexure - 5	Approval Status : GOK Order	√		
Annexure - 6	Approval Status : RGUHS Notification (Last 3 Years) Approval	√		
Annexure - 7	Approval Status : KNC Notification	√		
Annexure - 8	Status : INC Notification	√		
Annexure - 9	List of Post Basic B.Sc. Nursing Students as per format	√		
Annexure - 10	List of M.Sc. Nursing Students as per format	√		
Annexure - 11	Details of External /Part time Teachers	√		
Annexure - 12	Physical Facilities : 1. College Building- Own /rent /lease MOU documents, Sale deed, current year tax paid receipt, sanctioned building plan by competent authority, occupancy certificate, building accessibility-lift/ Rampin working condition, 2. Laboratories ✓ 3. Building related documents ✓ 4. Hostel ✓	√		
Annexure - 13	Vehicle Details : Bus	√		
Annexure - 14	Details of List of Library Books & others	√		
Annexure - 15	Academic Activities	√		
Annexure - 16	Details of Clinical/Hospital Facilities- registered Hospital MOU, latest KSPCB & KPME certificate, current academic year clinical fees paid receipts from affiliated hospitals.	√		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Annexure - 17	Details of Community Health Nursing Posting Facilities	√		
Annexure - 18	Master Rotation plans and Time tables	√		
Annexure - 19	List of Teachers with their Declaration forms & necessary documents	√		
Annexure -20	RGUHS approved guideship letters of M.Sc Nursing faculty each speciality wise	√		

Note: Verify & attach Relevant Documents (include staff declaration forms) along with this report. The recordings of the report should be clearly legible. LIC team is solely responsible for the details & remarks noted in the LIC format.

LIC Team Observations:

LIC Inspection done for continuation of Application for BSc (N), PB BSc (N), MSc (N), on 12/08/2025. On the day of inspection all documents pertaining to the college building, hostel (Boys & Girls) electricity (Generator), drinking water facilities, washrooms (separate for boys & girls) college vehicle, laboratories with chart and maniquis with equipments, library with books and Librarian, the teaching staff are verified and found to be as per the norm. One of the staff (Tutor) was on leave (Leave letter enclosed). The college has one parental hospital with 40 beds, two affiliated to Govt hospitals and two affiliated to private hospitals. All the facilities inspected were present on the day of inspection⁰⁴ 12/08/2025. Parent hospital statistics and affiliated or Govt hospital were 12/8/2025 and past three months may, June, July 2025 enclosed. The said affidavit sign by the institution heads are also enclosed

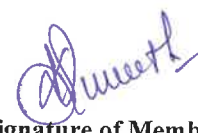


Signature of Chairman

A. Suresh S.
Kanakammas



Signature of Member (1)



Signature of Member (2)

MR. KALA. JUNEETHA

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at DR. M.V.SHETTY COLLEGE OF NURSING which has applied for continuation of affiliation for the academic year 2024-25.

We have conducted LIC inspection of this college on 12-08-25 and verified the infrastructure, Institutional facilities, Student Strength, Staff Post, Staff Biometrics, Students attendance and the original documents pertaining to institution. As per the Latest Minimum Standard Requirements (MSR) stipulated by Apex body and notification issued by RGUHS vide ref no: RGUHS/NSG/COA/2024-25, dated: 11/12/2023, we have also visited the attached hospital and verified the bed strength and clinical facility at the hospital.

The information recorded by us in the LIC reports is true and correct.

The LIC inspection report along with documents and soft copy is submitted to RGUHS.


Senate Member
(Chairman)


A C Member
(Member)


Subject Expert
(Member)


Signature of Chairman


Signature of Member (1)

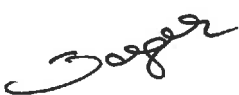

Signature of Member (2)

Instructions for reporting of Local inspections by RGUHS

1. LIC Team shall submit an Undertaking enclosed with the LIC order of having completed the inspection as per the RGUHS norms.
2. Team shall submit the report soft & hard copy within 48 hours of the inspection failing which _____
 - a. Team shall compulsorily visit the attached hospital and physically verify the bed strength and facilities provided along with the KPMEA & PCB Certificates.
 - b. Team shall obtain an undertaking/affidavit from the hospital in the prescribed format.
3. Submission of softcopy of Video recording, geo tagged Photography during LIC inspection is mandatory.
4. The check list should have specific comments wherever applicable.
5. Report shall not use the words Adequate/Satisfactory/ available/sufficient etc. where the specific information is sought such as Area of the land/ Dimensions of class rooms/ number of teaching faculty/ number of class rooms/Laboratories /number of books etc. Such reports will be rejected directly without the approval.
6. All ORIGINAL documents mentioned in the checklist must be verified by the team before writing comments in the report.
7. After the verification of the original documents, photocopies of the same to be collected and the copies to be attested by the seal and signature of the Principal.
8. Original Land documents to be verified: Dishaank app may be used to verify the owner's details of the particular institution.
9. For any misleading / wrong information the whole LIC team shall be made responsible.



Signature of Chairman



Signature of Member (1)



Signature of Member (2)

DR. M. V. SHETTY'S HOSPITAL

A. B. SHETTY CIRCLE, MANGALORE - 575 001 (S. INDIA)

Phone : 0824 - 2426699, 2428162

12.08.2025

Date.....

Details of IP and OPD List

MONTH	IPD	OPD
May	52	778
June	32	828
July	44	1014
From 01/08/2025 to 12/08/2025	37	602

Parent ~~Shetty~~
12/8/25
24/8/25
24/8/25

Dingy
Dr. M.V. Shetty's Hospital
A.B. Shetty Circle
Mangalore - 575 001.
Phone No. : 2426699, 4276699

Wenlock Hospital

2025-2026 ನೇ ಸಾಲಿನ ವೆನ್‌ಲಾಕ್ ಜಿಲ್ಲಾ ಆಸ್ಪತ್ರೆ, ಮುಗ್ಗೂರು ಇಲ್ಲಿ ದಾಖಲಾಗಿರುವ ಒಳರೋಗಿಗಳು/ ಹೊರರೋಗಿಗಳ ವಿವರ (ಏಪ್ರಿಲ್ 2025 ರಿಂದ ಮಾರ್ಚ್ 2026ರವರೆಗೆ)														
ಕ್ರ.ಸಂ	ವಿವರ	ಏಪ್ರಿಲ್ 2025	ಮೇ 2025	ಜೂನ್ 2025	ಜುಲೈ 2025	ಆಗಸ್ಟ್ 2025	ಸೆಪ್ಟೆಂಬರ್ 2025	ಅಕ್ಟೋಬರ್ 2025	ನವೆಂಬರ್ 2025	ಡಿಸೆಂಬರ್ 2025	ಜನವರಿ 2026	ಫೆಬ್ರವರಿ 2026	ಮಾರ್ಚ್ 2026	ಒಟ್ಟು
1	ಒಳರೋಗಿಗಳು	2347	2252	2194	2423	—	—	—	—	—	—	—	—	9216
2	ಹೊರರೋಗಿಗಳು	20225	19816	20709	25232	—	—	—	—	—	—	—	—	85982

[Signature]
Dist. Surgeon & Superintendent
Wenlock Dist. Hospital
Mangalore

[Signature]
1/10/25

[Signature]
R. K. H. S.

: 2 :

This is to confirm that the Dr. M.V. Shetty Hospital is functioning as affiliated/parent /own hospital for Dr. M.V.Shetty College of Nursing.

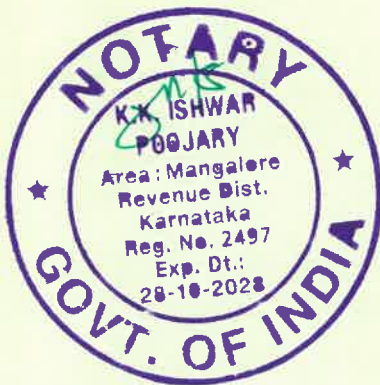
I, also confirm that our College is solely affiliated to Rajiv Gandhi University of Health Sciences, Bangalore and Hospital is functioning as parent hospital to Dr. M.V.Shetty College of Nursing only and not to any other nursing college.

The information provided by me is true and correct.

Hima Urmila Shetty

Prof. Dr. Hima Urmila Shetty

*Srinivas
Dr. M.V. Shetty
Mangalore*



ISSUE OF NOTARIAL STAMPS IS STOPPED, HENCE NOT AFFIXED.

[Signature]

SWORN BEFORE ME

[Signature] 20/8/2024

K.K. ISHWAR POOJARY

Notary for Dist. (Govt. of India)

Capital Avenue Building

Near DC Office, Mangalore - 1

Notarial Regn. No. 861/2002

Book No. 2

Errors/Corrections Etc.



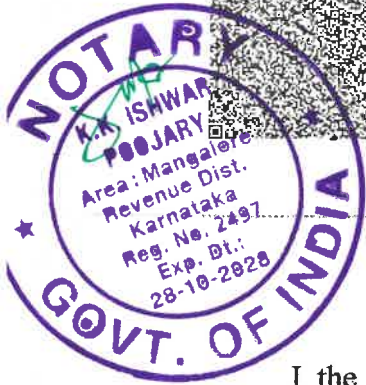
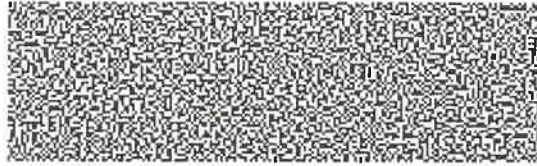
सत्यमेव जयते

INDIA NON JUDICIAL

Government of Karnataka

e-Stamp

Certificate No. : IN-KA14500733008476X
 Certificate Issued Date : 11-Aug-2025 02:46 PM
 Account Reference : NONACC (FI)/ kacrsf108/ MANGALORE9/ KA-DK
 Unique Doc. Reference : SUBIN-KAKACRSFL0844114490028908X
 Purchased by : DR M V SHETTY MEMORIAL TRUST
 Description of Document : Article 4 Affidavit
 Property Description : AFFIDAVIT
 Consideration Price (Rs.) : 0
 (Zero)
 First Party : DR M V SHETTY MEMORIAL TRUST
 Second Party : R G U H S BANGALORE
 Stamp Duty Paid By : DR M V SHETTY MEMORIAL TRUST
 Stamp Duty Amount(Rs.) : 100
 (One Hundred only)



Please write or type below this line

AFFIDAVIT

I the Chairperson of the Trust, Prof. Dr. Hima Urmila Shetty is submitting the affidavit to University.

The Dr. M.V.Shetty Memorial trust ® is running /managing the college, Dr. M.V.Shetty College of Nursing since 1987 (38years).

[Signature]
 12/8/25

.....2..
Hima Urmila Shetty

Statutory Alert:

- The authenticity of this Stamp certificate should be verified at 'www.shcilestamp.com' or using e-Stamp Mobile App of Stock Holding. Any discrepancy in the details on this Certificate and as available on the website / Mobile App renders it invalid.
- The onus of checking the legitimacy is on the users of the certificate.
- In case of any discrepancy please inform the Competent Authority.

I confirm that all the information provided by us to the LIC team is true and correct to the best of my knowledge.

I confirm that the faculty in the college is employed for full time in the college.

I also confirm that the college is solely managed by the trust and is not leased/sub leased to any other trust/agency to managed the college.

I also confirm that the college is abiding to the norms of Apex body/RGUHS. As prescribed from time to time.

If any of the information declared is found to be false/misleading, Principal and the Trust management can be held responsible and suitable action can be initiated by the University.

Hima Urmila Shetty

Prof. Dr. Hima Urmila Shetty

Srinivas
SRINIVAS
Dr MVSUR)
Mangalore.



ISSUE OF NOTARIAL STAMPS IS
STOPPED, HENCE NOT AFFIXED.

Sel
LIC
12/06/25

SWORN BEFORE ME

8/8/2025

K.K. ISHWAR POOJARY

Notary for Dist. (Govt. of India)

Capital Avenue Building

Near DC Office, Mangalore - 1

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