



Rajiv Gandhi University of Health Sciences, Karnataka

4th 'T' Block Jayanagar, Bangalore – 560041

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

INSPECTION PROFORMA FOR NURSING 2025-26 AY

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. Shashi Kumar HC	Dr. Pravin G U	Juliana D'Souza
Designation	Professor	Principal, Sri	Asst. Professor,
Address	Rajarajeshwari Dental College & Hospital, Bangalore	Chamundeswari Medical College Hospital & Research Institute, Ramana gari St. 562106	STG college of Nursing, Dakshina Kannada
Mobile No	9980280485	9844455599	9902195317
Email ID			

Inspection For the Academic Year : 2025 - 26

Date of Inspection: 15/09/2025

(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	CSI Lombard Memorial College of Nursing, Udupi. Mission Street, P.B. No. 5, Udupi. 576101	2	Year of Establishment
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	Church of South India (CSI) Karnataka Southern Diocese (KSD), Balmatta, Mangalore - 575002 (Enclose copy of Registration documents of Society/Trust)	Annexure - 1	
		Email: sushiljathanna@hotmail.com	Website: https://www.lombard-hospital.in	
		Office No: 0820-4294478	Mobile No: 8971980641	

1, Dr. Shashi Kumar
Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	(b). Name of the president/Secretary/Chairman of Trust/Society & Phone No	Dr. Sushil Jathanna Ph: 99 648 79727		
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : 14 (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2		
5	a) Details of Principal/Head of the institution (After MSc)	Name: Dr. Suja Karkada Qualification: M.Sc, M.Phil, PhD Experience after MSc: 27 years Email: Suja.karkada625@gmail.com	Mobile No: +91 944 8835274 Office No: 0820-4294478 Fax No: — Residential phone No: —	
	b) Drawing authority of the college	Lombard Memorial Hospital		
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) Annexure - 3

7. Affiliation Fee Paid Details:

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		1000/-	1,95,000/-	50/-	25,000/-	2,21,050/-
Post Basic B.Sc. Nursing		—	—	—	—	
Total (A)						2,21,050/-
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation		No of Seats X Prescribed fees of each faculty			
	1. Not Applicable					
	2.					
	3.					
	4.					
	5.					
			Total (B)			
NPCC						
			Total (C)			
Grand Total (A+B+C)						
Online Transaction Number or Details: BD 00000007815620 / BD 00000007567066						

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Remarks:

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	MED 250 RGV 2024 BENGAL LURU dated: 10/12/2024 Annexure - 5	RGUHS/AFF/ NSG/N 3951 2024-25 dt: 26.12.2024 Annexure - 6	KSNC 2353: 2024-25 dt: 10.03.2025 Annexure - 7	School code: 150625 dt: 2025-26 Annexure - 8	
	Affiliation Sanctioned Intake	60	60	60	60	
	Admissions Made for the Current Academic Year					
Post Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake					
	Admissions Made for the Current Academic Year					
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					
	Admissions Made for the Current Academic Year					
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake					

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	Admissions Made for the Current Academic Year					
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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	03	07	07	12	29
	Female	36	33	31	28	128
Post Basic B.Sc Nursing	Male					
	Female					
M.Sc Nursing	Male					
	Female					
M.Sc NPCC	Male					
	Female					

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

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-----

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) *NA*

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-----

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: _____

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

12. Teaching Faculty Requirements for all Nursing Programs:

Sl. No	Designation	Required					Existing / Available				Deficit			
		B.Sc (N)					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											
2	Vice-Principal	1	1											
3	Professor	1	1-2					1*						
4	Associate Professor	2	2-4					1*						
5	Assistant Professor	3	3-8				2	3*						
6	Tutor	8-16	16-24				2-10	--						
	Total	16-24	24-40				4-12				31			

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)

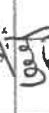
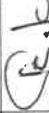
250 students				
* Aadhar based biometric attendance for students				


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	KSNC Reg. Number	Teaching experience		Date of joining	Form -16 Submitted (Yes/No)	Signature of Faculty
						After UG yr	After PG yr			
1.	Dr. Suja Karkada	Prof & Principal	Ph D Community	MSc-1998 PhD-2010	13160	4 yr	27	17-09-2019	Yes	
2.	Mr. Bijju S.	Prof & Vice Principal	MSc Psychiatry	MSc-2009	24708	9 yr	14	01-04-2025	No	
3.	Mrs. Malathi	Professor	MSc OBG	MSc-2008	15299	18	17	11-01-2022	Yes	
4.	Mrs. Janet Smitha Karkada	Professor	MSc Med-Surg NSG	MSc-2007	26306	2	17	09-10-2019	Yes	
5.	Mrs. Celestine Susan	Asso. Prof.	MSc Community	MSc-2014	2652	1 1/2	11	16-08-2018	No	
6.	Mrs. Preena Corda	Asst. Prof.	MSc Med-Surg NSG	MSc-2015	42595	—	5.5	06-01-2022	No	
7.	Mrs. Veena Sopliya Menezes	Asst. Prof.	MSc Paediatrics	MSc-2020	22193	11	5	07-02-2021	Yes	
8.	Mrs. Reena Veneeiya D'Souza	Lecturer	MSc OBG	MSc 2023	43276	1	2	10-10-2023	No	
9.	Mrs. Vijaya K S	Asst. Lecturer	PCBSc (N)	2012	21101	12	—	01-09-2013	No	
10.	Mrs. Jenevive	Asst. "	PCBSc (N)	2012	23977	13	—	02-07-2024	No	
11.	Mrs. Manuatha	Asst. "	PCBSc (N)	2004	10689	2 yr 2 m	—	01-06-2023	No	
12.	Mrs. Rahel Soans	Asst. "	B. Sc (N)	2010	36321	11	—	01-09-2021	No	
13.	Mrs. Sonali Pojary	Asst. "	B. Sc (N)	2009	24528	9	—	03-01-2020	No	
14.	Mrs. Priya Jesna Fernandes	Asst. "	B. Sc (N)	2013	62548	4	—	04-01-2020	No	
15.	Mrs. Hemalatha Bangera	Asst. "	PCBSc (N)	2015	33456	9	—	04-09-2016	No	
16.	Mrs. Sahana Joylin	Asst. Lecturer	B. Sc (N)	2014	66983	5	—	01-07-2020	No	
17.	Mrs. Reekhal Rosita Salins	Asst. "	B. Sc (N)	2020	107483	1 yr 5 m	—	01-04-2024	No	
18.	Mr. Keerthesh	Asst. "	B. Sc (N)	2022	136478	1 yr 8 m	—	3-01-2024	No	
19.	Mrs. Jane Lolita Pais	"	PCBSc (N)	2022	193440	1 yr 8 m	—	04-01-2024	No	
20.	Mrs. Novita Walinda Noronha	"	B. Sc (N)	2022	137030	2 yr 4 m	—	24-04-2023	No	
21.	Mr. Steryl George Amanna	"	B. Sc (N)	2023	145001	2 yr	—	04-08-2023	No	
22.	Mrs. Shree Laksh	"	B. Sc (N)	2022	136470	1 yr 4 m	—	20-05-2024	No	



Signature of Chairman

Signature of Member (1)



Signature of Member (2)

23.	Ms. Latha	Asst. Lecturer	B.Sc (N)	2013	58384	1 yr	—	24.09.2024	No	Latha
24.	Ms. Savya Nayak	Asst. Lecturer	B.Sc (N)	2024	232158	10 Months	—	25.10.2024	No	Savya
25.	Mr. Rupesh Patkar	Asst. Lecturer	P.C.B.Sc (N)	2024	248222	8 Months	—	02.12.2024	No	Rupesh
26.	Mrs. Shanal Supriya	Asst. "	B.Sc (N)	2020	107221	7 "	—	10.02.2025	No	Shanal
27.	Ms. Nishmitha	" "	B.Sc (N)	2021	126577	8 "	—	02.12.2024	No	Nishmitha
28.	Ms. Mary	Asst. "	P.C.B.Sc (N)	2024	260754	7 Months	—	10.02.2025	No	Mary
29.	Ms. Lavanya Pearl Gogoi	Asst. Lecturer	B.Sc (N)	2024	174866	6 Months	—	02.03.2025	No	Lavanya
30.	Ms. Shreyaniti	Asst. "	P.C.B.Sc (N)	2024	174952	7 Months	—	10.02.2025	No	Shreyaniti
31.	Ms. Dhanya	Asst. Lecturer	B.Sc (N)	2024	167672	3 Months	—	02.06.2025	No	Dhanya
32.										
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Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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

14. Physical Facilities :

14.1. College Building:

Annexure - 12

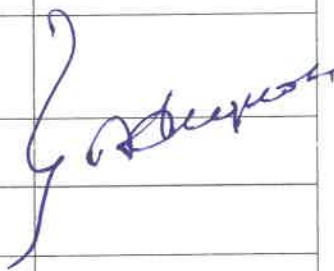
S. No	Details	Required	Existing	Verified by LIC team
1	Built – up area of the building (in Sq. Ft)	23,200sq.ft (40 – 60 intake)	33317.11 ft ²	
	Note: The 23,200sq.ft only for B.Sc Nursing programme with 40-60 intake. (The gazette of India extraordinary part III— section 4 published by authority, [Indian 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	7+1 class rooms 67161.50 ft ²	
	P.B.B.Sc (N) : 600 sq ft	2 Class rooms 600sq ft Each	—	
	M.Sc (N) : 600 sq ft	2 Class rooms 600sq ft Each	—	
	NPCC : 600sq ft	2 Class rooms 600sq ft Each	—	
3	Administrative Facilities			
	Office			
	1. Principal's Chamber	300	348.60 ft ²	
	2. Vice-Principal Chamber	200	198.91 ft ²	
	3. HOD	5 x 200 = 1000	1000 ft ²	
	4. Professor/Assoc. Prof	800+2400=3200	1600 ft ²	Adequate
	5. Lecturer/ Tutors			
	Institution office /Others			
	6. Office of Administrative, clerical staff and PA (s)	600	650 sq.ft.	
	7. Accountants Office	100	1200 sq.ft.	
	8. Store Room	100	200 sq.ft	
	9. Record room	100	300 sq.ft.	
	10. Room for maintenance staff	100	200 sq.ft.	
	11. Xeroxing room	100	100 sq.ft.	
	12. common room (Girls & Boys)	600+400= 1000	1100 sq.ft.	
	13. Multipurpose hall / Seminar hall/ examination hall	3000	8000. ft ²	
	14. Toilets	1000	1011.28 ft ²	


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

	15. A.V/Aids room	600	600	
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S. No	Details	Required	Existing ft ²	Verified by LIC team
4	LABORATORIES (40-60 intake)			
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	1551.68	
	Nutrition & Community Health Nursing	1200sq.ft	900+900	
	Obstetrics and Gynecology Laboratory	900sq.ft	900.31	
	Pediatrics Nursing Laboratory	900sq.ft	600.42	
	Pre-Clinical Sciences Laboratory	900sq.ft	900.00	
	Computer Lab (1: 5 computer :student)	1500sq.ft	894.41	

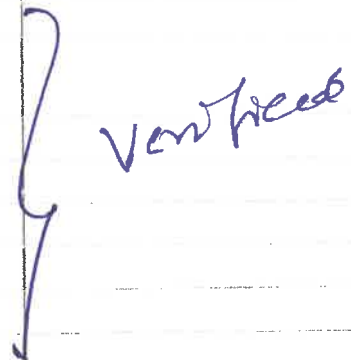
Note:

- 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	
2	Is the college building own or leased ?	
3	Blue print of the building plan approved and attested by competent authority.	
4	Building construction license from competent authority	
5	Tax paid receipt (Latest / current year)	
6	Occupancy certificate.	
7	Sale deed / Lease deed of the building / Land.	
8	Land Conversion order from DC	
9	Town planning/Authorities approval order	

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

Annexure – 13

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving Licence
03	KA 20 AA 8910 KA 19 MF 7932 KA 20 ME 0866	42 08 05	✓ Yes / No	✓ Yes / No	✓ Yes / No

16. Library facility : Enclose list of library books

Annexure - 14

Library Facilities	Existing Size in Sq ft	Separate Library	Ventilation	Lighting	Verified by LIC team
Required 2300 Sq.Ft	1800	YES ☒ No ☐			

Total No. of Nursing Books available	3077	No. of Nursing Journals subscribed	15
No. of Thesis/Research titles available	72	Is internet facility available for Students?	Yes
No of e-books	Through Helinet	How many books were purchased in last financial year?	375

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	Ms. Rajini R.S.	M. Li.Sc	10	
2	Mrs. Lona	B.A	18	

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		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Conferences conducted		
Conferences attended		

* 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 CSI Lombard Memorial Hospital P.B. No. 5, Mission Road, Udupi. 576101 MOU(Registered parent hospital MOU)	150	Same campus	89%	Verified
NAME OF THE TRUST/ Person owning The Hospital CSI Trust Association KSD, Balmatta, Mangalore 575002				
Name Of The Owner Of The Trust of Hospital CSI Trust Association				
Affiliated hospitals- Full Name & Address of the Parent Hospital				
1. Av Baliga Hospital, Doddanagudde, Udupi.	100	5 Km.		
2. Govt. District Hospital, Ajjarkadu Udupi	234	1 km		
3 Fr. Muller's Hospital M'lo - Psychiatry	15.0	55 Km.		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	(MOU/Clinical permission letter)		
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(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/CCU. (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:


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

18.1. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	40	35	5	
Surgery including OT	20	18	45	45
Obstetrics & Gynecology	30	23	124	120
Pediatrics, / NICU	15	13 + 03	24	22
Emergency Medicine / trauma	06	04	6	6
Psychiatry* / orthopedics	10	10	80	70

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	03			
Minor OT	01			
Dental, Otorhinolaryngology, Ophthalmology	05	03		
Burns and Plastic	00			
Neonatology care unit	05			
Communicable disease/Respiratory medicine/TB & chest diseases	00			
Dermatology	00			
Cardiology	00			
Oncology	04	02	06	06
Neurology/Neuro-surgery				
Nephrology/Urology	05	03	10	10
ICU/CCU	10	06	16	12
Geriatric Medicine				

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Any other				
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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		PHC, Maripura	
Adopted / Affiliated ✓		Affiliated	
Administrated by		State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute		5 km.	
b. Services Rendered by Health & Family Welfare Programmes		All health care services, ANC, PNC, School Health program & all National Health Prog.	
URBAN FEILD :			
a. Name of CHC / PHC / SC		Family Planning Association of India.	
Adopted / Affiliated		Affiliated	
Administrated by		State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute		2 km.	
b. Services Rendered by Health & Family Welfare Programmes		All the government program.	
N.B.: A copy of the agreement for affiliation to the hospital and Health Centers to be attached.			

20	Master Rotation Plan : Annexure - 18			
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 ☐	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

f.	Practical record books - Midwifery case book	YES ☒	NO ☐
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 ☐

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 11, 275 (Female) 5448.91 (Male)	
c.	Is the Hostel Owned or Rented/Leased?	Own ☒	Rented/Leased ☐
d.	Is there separate provision of Hostel for Male and Female Students?	YES ☒	NO ☐
e.	Total No. of students in the hostel	Girls : 105	Boys : 10
f.	Total No. of rooms	Girls : 28	Boys : 05
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 of Chairman

Signature of Member (1)

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		✓	Verified
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 LibraryBooks & 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	✓		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	affiliated hospitals.			
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:

Infra structure and teaching faculty found to be adequate at the time of inspection.


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at CSJ Lambore CON. Udupi which has applied for continuation of affiliation for the academic year 2024-25.

We have conducted LIC inspection of this college on 15/07/23 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

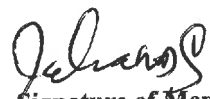
1. LIC Team shall submit an Undertaking enclosed with the LIC order of having completed the inspection as per the RGUHS norms.
2. Team shall submit the report soft & hard copy within 48 hours of the inspection failing which _____
 - a. Team shall compulsorily visit the attached hospital and physically 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)



UNDERTAKING by Trust Management

We the Chairman/President/Secretary/Member of the trust
Rt. Rev. Hemachandra Kumar are submitting the affidavit
to University.

The trust CSI Trust Association is running/managing
the colleges i. CSI Lombard Memorial College & Nursing.

2. CSI Lombard School of Nursing.
3. CSI Holdsworth College of Nursing Mysore. since 50 years
years. & CSI Redfern School of Nursing, Mysore.

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

We confirm that the faculty in the college are employed for full time in the college.

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

We 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.

***Note Undertaking should be given in affidavit**

Signature of Chairman

Signature of Member (1)

Signature of Member (2)



UNDERTAKING

I/We, Dr. Sushil Jathanna is/are the
Owners/MD/CEO/Board Members of the CSI Lombard Memorial hospital
situated at Mission Street, Udupi.
This is to confirm that our hospital Lombard Memorial Hospital is registered under
KPMEA and PCB with 150 beds and the bonafide certificate has been attached.
This is to confirm that the hospital CSI Lombard Memorial Hospital is functioning as
affiliated/parent/own hospital for CSI Lombard Memorial college.
We also confirm that our hospital is solely affiliated to
CSI Lombard Memorial College of Nursing college and is not affiliated to any other
nursing college.
The information provided by us is true and correct.
***Note Undertaking should be given in affidavit**


Signature of Chairman

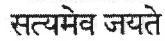

Signature of Member (1)


Signature of Member (2)

Signature of Chairman

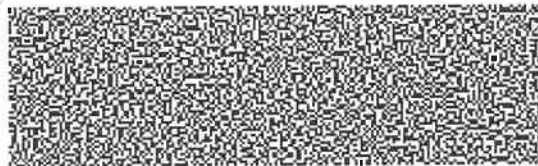
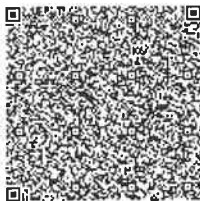
Signature of Member (1)

Signature of Member (2)



Government of Karnataka

Certificate No.	: IN-KA25228191546520X
Certificate Issued Date	: 22-Aug-2025 04:20 PM
Account Reference	: NONACC (FI)/ kacrsfl08/ UDUPH/ KA-UD
Unique Doc. Reference	: SUBIN-KAKACRSFL0864534674617978X
Purchased by	: DR SUSHIL DEVAPRASAD JATHANNA
Description of Document	: Article 4 Affidavit
Property Description	: AFFIDAVIT
Consideration Price (Rs.)	: 0 (Zero)
First Party	: DR SUSHIL DEVAPRASAD JATHANNA
Second Party	: RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCE
Stamp Duty Paid By	: DR SUSHIL DEVAPRASAD JATHANNA
Stamp Duty Amount(Rs.)	: 100 (One Hundred only)



Please write or type below this line

UNDERTAKING

I Dr. Sushil Devaprasad Jathanna is the Director of the CSI Lombard Memorial (Mission) Hospital, situated at Mission Street, Udupi Pin 576101.

Contd...2

Dr. Sushil Jathanna
MBBS, MSC, MRCP, MFPHM, FFPHM, DGM, DMS
Director
Lombard Memorial Hospital, Udupi

Statutory Alert:

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

This is to confirm that our hospital CSI Lombard Memorial (Mission) Hospital is registered under KPMEA and PCB with 150 beds and the bonafide certificate has been attached.

This is to confirm that the hospital CSI Lombard Memorial (Mission) Hospital is functioning as parent hospital for CSI Lombard Memorial College of Nursing.

We also confirm that our hospital is solely affiliated to CSI Lombard Memorial College of Nursing and is not affiliated to any other nursing college.

The information provided by us is true and correct.



Dr. Sushil Jathanna
MBBS, MSc, MRCP, MFPHM, FFPHM, DGM, DNB
Director
CSI Lombard Memorial Hospital, Udupi



सत्यमेव जयते

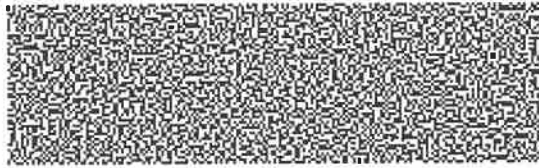
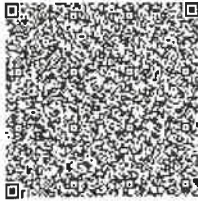
INDIA NON JUDICIAL

Government of Karnataka

Rs. 100

e-Stamp

Certificate No.	: IN-KA25556635749120X
Certificate Issued Date	: 23-Aug-2025 11:17 AM
Account Reference	: NONACC (FI)/ kacrsfl08/ UDUPI1/ KA-UD
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Purchased by	: RT REV HEMACHANDRA KUMAR
Description of Document	: Article 4 Affidavit
Property Description	: AFFIDAVIT
Consideration Price (Rs.)	: 0 (Zero)
First Party	: RT REV HEMACHANDRA KUMAR
Second Party	: RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES
Stamp Duty Paid By	: RT REV HEMACHANDRA KUMAR
Stamp Duty Amount(Rs.)	: 100 (One Hundred only)



Please write or type below this line

UNDERTAKING by Trust Management

We the **Chairman/President/Secretary/Member** of the Trust are submitting the affidavit to University.

The trust – CSI Trust Association in Karnataka Southern Diocese is running /managing the colleges.

Contd....2

[Signature]
Bishop

**Karnataka Southern Diocese
Church of South India**

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1. CSI Lombard Memorial College of Nursing, Udupi
2. CSI Redfern School of Nursing, Hassan
3. CSI Holdsworth College of Nursing, Mysore,
since over 50 years.

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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.



Rt Rev Hemachandra Kumar

Bishop,

Bishop
Karnataka Southern Diocese
Church of South India

