

DEPARTMENT OF PSYCHIATRY
REGIONAL INSTITUTE OF MEDICAL SCIENCES,
IMPHAL

No.19/Psy/IV/81/96

Imphal the 3rd May 2017.

To

The Dean (Academic),
Regional Institute of Medical Sciences,
Imphal.

Subject:- Submission of monthly patient OPD attendance
theory classes and lecture schedule for the
month of April 2017.

Sir,

With reference to No.B/1737/2016-RIMS dated 21st October 2016
I am submitting herewith the duly filled up prescribed proforma for
No. of patient's admission, discharge and OPD attendance for different
faculty members for the month of April 2017.

This is to comply the directions taken in the proceedings of
meeting held on 13.10.2016 in accordance to oversight committee of M
Medical Council of India and for your kind perusal and necessary
action.

With warm regards.

Encloser:

All the performas duly
filled up-2 pages.

Yours faithfully,



(Dr. N. Heramani Singh)
Prof. & Head,
Department of Psychiatry,
RIMS, Imphal.

Handwritten signature: Robinson

Report For the month of April 2017.

Formats for submitting various data by the HODs in compliance of the directives of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/ Transfer	Indian Medical Registration No. (for postgraduate courses)
		already submitted			

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
				already submitted	



C. Monthly Teaching Report for the month April 2017 ~~2016~~

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof	No. of Students on roll	No. of students who actually attended the class
8 th Semester	6-4-17	8-9 AM	Schizophrenia Part 1	Prof R.K. Lamsika	A		85	66.
"	13-4-17	"	Schizophrenia Part 2.	"	A		"	59
"	20-4-17	"	Treatment modalities in Psychiatry	"	A		"	67
"	23.4.17	"	Mental Rehabilitation	Prof Th. Bishnoi	A		"	64.

D. Cumulative Report for Teaching for the month April 2017 ~~2016~~

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (>2 times)	Reason(s) for cancellation of classes, if any
8 th Semester	April	4	4	1, 2, 4, 6, 13, 15, 18, 20, 21, 30, 31 32, 33, 36, 40, 44, 50, 54, 59, 62, 64, 66, 70, 73,	

[Signature]
20/05/17

APRIL 2017

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up whenever applicable)

Month	Name of the faculty	Number of patient seen in the OPD by the faculty	Number of patients in the ward under the faculty	Number of Discharges	Number of deaths	Number of Surgeries	Number of Procedures	Number of investigation
APRIL 2017	Dr N. Hastawani HOD - UNIT 1 (A)	304	20	10				
"	Dr. Sriandha. UNIT 1 (A)	207	20 "	"				
"	Dr R.K. LEMIN UNIT (2)	722	29	15				
"	Dr I. Dikashi UNIT 1 (B)	267	13	4				
Total =		1500						

F. Infrastructure

List the department specific infrastructure as per MCI guidelines.

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on	Remarks
		already Submitted	
		20/05/17	