



LATE MRS. HOUSABAI HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL, NIMSHIRGAON.

Sangli-Kolhapur Highway, Ichalkaranji Phata, Near Dharmnagar, Tal.- Shirol,
Dist.- Kolhapur- 416 101 (Maharashtra)

■ Email:- hhmc.20@gmail.com ■ Website:-www.hhmc.co.in

■ Tel. & Fax No.:- (02322) 295503 Office No. : 8446149667, Mob. No.:- 9422582621 / 9422421294

Approved by Ayush New Delhi, NCH New Delhi, Maharashtra State Govt. & Affiliated to MUHS Nashik

Academic Year - 2024-2025

1. Hospital Name-

**Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon.**

Address- Sangli-Kolhapur Highway, Ichalkaranji Phata, Near
Dharmnagar, A/p- Nimshirgaon, Tal- Shirol, Dist-
Kolhapur-416101(Maharashtra)

Details of Registration

| Sr. No. | Details of Registration | |
|---------|-------------------------|--------------------------|
| 01 | Registration No. | 0478/2021 Nimshirgaon |
| 02 | Registration Date | 30/07/2021 |
| 03 | Place | A/P- Nimshirgaon |
| 04 | Valid upto | 01/01/2025 to 31/03/2028 |
| 05 | Total No. of Beds | 50 |



Dr. Mrs. Shubhangi S. Magdum
Principal
Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon



महाराष्ट्र शासन

GOVERNMENT OF MAHARASHTRA

आरोग्य विभाग, जिल्हा परिषद कोल्हापूर

HEALTH DEPARTMENT ZILLA PARASHID KOLHAPUR

मुंबई शुश्रूषा गृह नोंदणी अधिनियम, १९४९

Bombay Nursing Home Act of 1949

महाराष्ट्र शुश्रूषा गृह नोंदणी नियम १९७३

Maharashtra Nursing Homes Registration Rules, 1973

महाराष्ट्र शुश्रूषागृह नोंदणी अधिनियम (सुधारित) नियम २०२१

Maharashtra Nursing Homes Registration (Amendment) Rules 2021

प्रमाणपत्र / CERTIFICATE

(मुंबई शुश्रूषा गृह नोंदणी अधिनियम, १९४९ च्या कलम ५ अन्वये दिलेले प्रमाणपत्र)
(Bombay Nursing Home Act of 1949 Registration Certificate issued under section 5)

Dr. Shri / Smt

Dr. Sukumar J. Magdum Foundation's Jaysingpur

डॉ. श्री/श्रीमती

डॉ सुकुमार जे. मगदूम फाऊंडेशन जयसिंगपूर संचलित

Hospital name

Late Mrs. Hausabai Homeopathic Medical College and Hospital

रुग्णालयाचे नांव

कै. सौ. हौसाबाई होमिओपॅथिक मेडिकल कॉलेज अँड हॉस्पिटल

Address

Group No. 607, G.M.No. 1230, A/P Nimshirgaon Tal. Shirol Dist. Kolhapur

पत्ता

गट नंबर ६०७, ग्रा.मि.नं. १२३०, मु पो निमशिरगांव ता शिरोळ जि कोल्हापूर

नवीन नोंदणी/नूतनीकरणासाठी वरील नर्सिंग होम/मॅटर्निटी होमची नोंदणी करण्यात आली आहे. उक्त नर्सिंग होम / मॅटर्निटी होम चालविण्यास परवानगी दिली जात आहे. Above Nursing Home/Maternity Home has been registered for new registration / renewal. Permission is being granted to operate the said Nursing Home / Maternity Home.

Registration Number : 0498

नोंदणी क्रमांक :

Maternity Beds : 0030

प्रसूती खाटा :

Registration Date : 01/01/2025

नोंदणी दिनांक :

Nursing Beds : 0070

शुश्रूषा खाटा :

Place : kolhapur

ठिकाणी : कोल्हापूर

Registration /Renewal Date : 01/01/2025

नोंदणी/नूतनीकरण दिनांक



This certificate shall be valid up to 31 March 2028

हे प्रमाणपत्र ३१ मार्च २०२८ पर्यंत वैध असेल.

Note - In case of false information provided by Applicant,
Registration Certificate will become null and void
and legal action will be proceeded against him.

(DR. ANIRUDDHA PIMPLE)

District Health Officer
Zilla Parishad Kolhapur

Dr. Sukumar J. Magdum Foundation's, Jaysingpur



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PART II Hospital Details

A.Y. - 2024-25

3. Bed Strength - Ward Distribution - As Per MSE & Intake Capacity

| Sr. No | Department | Bed Required (Including UG/PG) | Total Beds Available | Nursing Station or Duty Room Y/N | Doctor Room Y/N | Store Room Y/N | Remark |
|--------|---------------|--------------------------------|----------------------|----------------------------------|-----------------|----------------|------------------|
| 01 | Gen. Medicine | 25 | 25 | Yes | Yes | Yes | PG Not Available |
| 02 | Pediatrics | 05 | 05 | Yes | Yes | Yes | |
| 03 | Surgery | 10 | 10 | Yes | Yes | Yes | |
| 04 | OBGY | 10 | 10 | Yes | Yes | Yes | |
| Total | | 50 | 50 | | | | |



Principal
Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon.



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A. INFRASTRUCTURE REQUIREMENT

TABLE

| S.No. | Particulars | Built up area (in sq.mt.) |
|-------|--|---------------------------|
| | | upto 100 students intake |
| 1. | Hospital Administration Block | 100 |
| | (a) Rooms for : | |
| | (i) Superintendent | Available |
| | (ii) Public relation officer | |
| | (iii) Staff nurse | |
| | (b) Reception and Registration | |
| 2. | Out-patient department | 220 |
| | (a) | |
| | (i) General Medicine | Available |
| | (ii) Gynecology and obstetrics | |
| | (iii) Surgery | |
| | (iv) Pediatrics and child health | |
| | (b) | |
| | (i) Dressing room | |
| | (ii) Pharmacy store | |
| | (iii) Waiting area for patient | |
| 3. | Clinical teaching room: 04(thirty square meter area for each room) | 120 |
| 4. | Skill Laboratory | 100 |
| 5. | In-patient department | |
| | (i) General medicine (male and female ward/ bed separately) | 450 |
| | (ii) Pediatrics | |
| | (iii) Surgery (male and female ward separately) | |
| | (iv) Obstetrics and Gynecology | |
| | (v) Toilets and bathroom (separate for male and female) | |
| | (vi) Doctors duty room | Available |
| | (vii) Nursing stations or duty room for nurses | |
| | Pharmacy (ix) Record room | |



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| | (b) Reception and Registration | |
| | Out-patient department | 220 |
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| | (b) | |
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| | (v) Toilets and bathroom (separate for male and female) | |
| | (vi) Doctors duty room | |
| | (vii) Nursing stations or duty room for nurses Pharmacy (ix) Record room | |
| | | Available |



| | | |
|-----|---|----------------------|
| 6. | Operation theatre unit (i) Operation theatre (ii) Preparation room (iii) Post-operative recovery room (iv) Space for sterilized linen (v) Labor room (vi) Room for surgeon or obstetrician or assistants (vii) Nursing staff room | 100 Available |
| 7. | Rehabilitation unit (i) Physio-therapy (ii) Yoga clinic and hall (iii) Dietician | 100 Available |
| 8. | Central clinical laboratory (i) Pathology and microbiology (ii) Bio-chemistry | 30 Available |
| 9. | Radiology and Sonography section X-ray room, dark room, provisions for storing films and Chemicals | 40 Available |
| 10. | Pharmacy | Available |
| 11. | Emergency unit | Available |
| 12. | Hospital kitchen | Available |
| 13. | Stores | Available |



Furniture/Fixture/Equipment's Requirements for OPD

| Sr. No. | Name of the Equipment | 31 to 50 beds | Available For Number Of Beds In Hospital |
|---------|--|-----------------------------|--|
| 1. | Room with well- lighted and ventilated and equipped with a chair and a table for doctor | 1 per consultation room | Available |
| 2. | X-ray viewer | 1 per consultation room | Available |
| 3. | Two chairs for patients and attendants | 1 set per consultation room | Available |
| 4. | An examination table of 6 ft. X 2.5 ft. With privacy screen | 1 per consultation room | Available |
| 5. | Blood pressure apparatus | 1 per consultation room | Available |
| 6. | Stethoscope | 1 per consultation room | Available |
| 7. | Torch | 1 per consultation room | Available |
| 8. | Thermometer | 1 per consultation room | Available |
| 9. | Weighing machine. | 1 per consultation room | Available |
| 10. | Essential diagnostic tools required for examination of patients as per the scope of services offered by the hospital. | As per requirement | Available |
| 11. | Light source which gives light colour and temperature similar to solar light, Light intensity of atleast 500 lux at the point of examination | As per requirement | Available |
| 12. | Computers | 1 per consultation room | Available |
| 13. | Telephone equipment | As per requirement | Available |
| 14. | Air-conditioning | As per requirement | Available |
| 15. | Adequate lockable storage space | As per requirement | Available |
| 16. | Foot stools | 1 per consultation room | Available |



Dr. Sukumar J. Magdum Foundation's, Jaysingpur



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Year – – 2024-2025

5) Own Ambulance Facility is Available.

6) Medicine Dispensing Unit is Available 33.17 sq.mt

**Adequate Medicines in Different Potencies,
Biochemic Medicines and Mother Tincture are
Available**




Principal
Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon

AMBULANCE LICENCE

| | | |
|-----------------------------------|--|--|
| Regn. No. MH09EM8228 | | ARM075379 |
| Regd. Owner | DR. SURESH J. MADHUM FOUNDATION | |
| SDW of | NA | |
| Purpose | RWS / HPA | |
| Regn. Date | 18/08/2018 | |
| Color | FORCLR_WHITE | |
| Form | SMEL | |
| Vehicle Class | Ambulance - 10 | |
| Body Type | AMBULANCE BODIROOF | |
| Manufacturer | TATA MOTORS LTD | |
| Chassis No. | MAT480134KUR01064 | |
| Engine No. | 2JLDIC0R118FYJ02634 | |
| Model No. | WINGER 32WB AMB BSV (7+P) | |
| Hypothecated To | TATA MOTORS FINANCE LIMITED | |
| Manufacturing Dt | 03/2018 | |
| Seal Capacity | 608 | No. Of Cyls - 04 |
| Stand Capacity | 60 | Chassis Serial 01 |
| Tax Paid Up To | 11T | Unladen Wt 062010 |
| Regd. Validity | See P Card | Cabin Capacity 092018 |
| Address | A/P JAYSHIRPUR MAIN ROAD, JAYSHIRPUR TAL - SHIRDI DIST - KOLHAPUR, Kolhapur MH 416010 | |
| | | Wheel Base 697200 |
| | | R L W 003990 |
| RTO KOLHAPUR Issuing Authority | |  Signature Of Issuing Authority |

TRUE COPY

Principal

LATE Mrs. Housabai Homoeopathic
Medical College & Hospital Nimshirgaon

Dr. Sukumar J. Magdum Foundation's, Jaysingpur



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8. MOU with super specialty Hospital for
clinical training of student and its functional-
Uploaded the details - **Yes**




Dr. Mrs. Shubhangi S. Magdum
Principal

Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon



महाराष्ट्र MAHARASHTRA

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दस्तावेज प्रमाण/अनुबंध प्रमाण

दस्तावेज नोंदणी करणार आहेत का? होय/नाही

नोंदणी होणार असल्यास दुय्यम निबंधक कार्यालयाचे नांव

मुद्रांक विक्रेत्याचे नाव :- सौ. विद्या सुकुमार कन्यापा, रा. जयसिंगपूर

वॉल नं. १२६१००२१, प. नं. २३/१११६ ठिकाण - प्लॉट नं. ३३ आवंत ही सोसा. जवळपास

मुद्रांक किंती अ. नं. ९४३० दिनांक :- १२/०६/२०२३

मुद्रांक शुल्क किंमत रुपये १००/-

मुद्रांक विकत घेणाऱ्याचे नाव :- हौसबाई होमिओपॅथिक मेडिकल कॉलेज व हॉस्पिटल, निमशिर्गांव

दस्तावेज पकड्याचे नाव :- कुल्लोली विसिन्धु, सांगली

हस्तासल्यास त्याचे नांव व पत्ता :- डॉ. कुल्लोली सुकुमार भगदूत

मिळकतीचे वर्णन

पोस्टला रक्कम रुपये :-



23 MAY 2023

२

SUB-TREASURY OFFICER

SHIROL

V. S. Kulkarni

मुद्रांक विक्रेत्याची सही

मुद्रांक विकत घेणाऱ्याची सही

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून ६ महिन्यांत यावरून बंदनारातक आहे.

MEMORANDUM OF UNDERSTANDING

Memorandum Of Understanding is made on 01 Day 03 Month 2023 year Between

Mrs. Housabai Homoeopathic Medical College & Hospital (Near Dharmanagar, Sangli Kolhapur Highway, Ichalkarnaji Phata, Nimshirgaon Tal- shirol Dist- Kolhapur,) which is represented by its Principal herein named as party A

AND

Kullolli Institute of Health Services C. Road Raghunandhan Colony, Visharambhag Sangli represented by Dr. Monika Kullolli named as party B

The parties hitherto agree as follows:

- 1) Dr. Monika Kullolli Running multispecialty Hospital in Visharambhag Sangli where they treat the patient from multispecialty like Ophthalmology, Medical' surgical and Gynecology / obstetrics.. Late.Mrs Housabai Homoeopathic medical college is also running Hospital in Nimshirgaon at college site' Tal- shirol Drst- Kolhapur'
- 2) Hereby both parties are agreed to attach Kullolli Institute of Health Services C. Road Raghunandhan Colony, Visharambhag Sangli to Medical College for learning purpose of Medical Students. this MOU will be for 5years i.e 01/03/2023 to 31/02/2028 If required this MoU can be extended or if college Hospital Develop and there is no need then party A can give 1 month notice to party B and this MOU can be terminated'
- 3) Responsibility of transport and teaching will be of party A
- 4) Party B has to make arrangement of place for teaching



Party -A

Dr. Mrs. Shubhangi Sukumar Magdum
M. D. HOM

Late.Mrs Housabai Homoeopathic medical
college & Hospital in Nimshirgaon

**Hospital Superintendent,
H.H.M.C. & Hospital.Nimshirgaon**



Party -B

Dr. Mrs Monika Kullolli
M. D. Gyn.

Kullolli Institute of Health Services
C. Road Raghunandhan Colony,
Visharambhag Sangli

**Medical Superintendent
Kullolli Institute of Health Services
Visharambhag, Sangli.**

691
29/02/2020



महाराष्ट्र MAHARASHTRA

2019

WG 333027

दस्तावेज नोंदणी करणार आहेत का?
नोंदणी होणार असल्यास दर्याम निबंधक कार्यालयाचे नाव :-

Understanding

मिळकतीचे धर्जन

मोबदला रक्कम

मुद्रांक विकत घेणाऱ्याचे नाव :-

प्रिन्सिपल

Late Mrs. Hausabai Homoeopathic Medical College and Hospital, Nimshirgaon

दुसऱ्या पक्षाकराचे नाव :-

हस्त अस्तव्यास त्याचे नाव व पत्ता :-

मुद्रांक शुल्क रक्कम

मुद्रांक विक्री नॉटरी अनु क्रमांक / दिनांक :-

मुद्रांक विकत घेणाऱ्याची सही / दिनांक :-

वस्तुनामाधारक मुद्रांक विक्रीचे नाव, सही व पत्ता :-

क्रमांक तसेच मुद्रांक विक्रीचे ठिकाण / पत्ता :-

हस्त अस्तव्यास करणारी मुद्रांक विक्री करणारी व्यक्ती
हस्त अस्तव्यास करणारी मुद्रांक विक्री करणारी व्यक्ती
हस्त अस्तव्यास करणारी मुद्रांक विक्री करणारी व्यक्ती

श्रीमान हिममत कांकर

90242

26 FEB 2020

श्री. शैलेश सुरेश कुलकर्णी

२९९, गल्ली नं. ३, ब्लॉक नं. ६६/६७, जयसिंगपूर, ता. शिरोळ
वि.प.क्र ९७/२००३-०४ / Code - 2612027

Memorandum of understanding

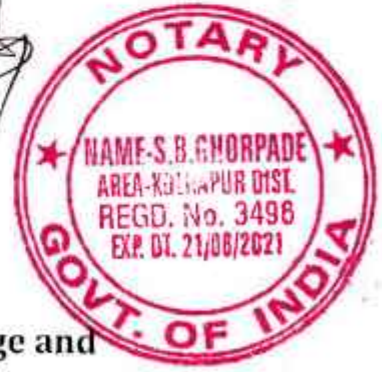
Between

Principal Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon

And

Chairman

Dr. Sukumar J. Magdum Foundation Hospital Jaysingpur.



No. of Corrections Nil

Dr. Sukumar J. Magdum Foundation runs Hospital in Jaysingpur, where Medical, Surgical, Obstetric and Gynecological cases are treated. Also various operations are done.

Dr. Sukumar J. Magdum Foundation is also running Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon.

Hereby both parties are agreed to attach Dr. Sukumar J. Magdum Foundation Hospital Jaysingpur to college for expose of medical, surgical, obstetric and gynaec cases to Students College. This MOU will be for 5 years i.e. from 05.02.2020 to 04.02.2025. If required this MOU can be extended, or if college hospital develops and there is no need, then Party A can give 1 month notice to party B and this MOU can be terminated.

Responsibility of transport and teaching will be of party A. Party B has to make arrangement of place for teaching.


Principal


Chairman

Late Mrs. Housabai Homoeopathic
Medical College and Hospital, Nimshirgaon
Party A

Dr. Sukumar J. Magdum Foundation
Jaysingpur
Party B



Sr. No. 691
Date :- 29 FEB 2020

SIGNED BEFORE ME



Adv. SARJERAO B. GHORPADE
NOTARY PUBLIC GOVT OF INDIA, Regd. No. 3496
OFFICE - OPP. JAYSINGPUR-UDGAON BANK, PATIL BUILDING,
1st FLOOR, SANGLI-KOLHAPUR ROAD, JAYSINGPUR,
TAL. SHIROL, DIST. KOLHAPUR, (Mob. No. 9421113620)

No. of Corrections Nil





महाराष्ट्र MAHARASHTRA

2021

YV 475305



25 JAN 2022

SUB-TREASURY OFFICE
SHIROL

दस्तावेज प्रकार अनुच्छेद क्रमांक
दस्त नॉटणी करणार आहेत का ?
नोंदणी होणार असल्यास दुसऱ्या निबंधक कार्यालयकडे

पिछकतीचे वर्णन

पीछकतीचे रकम

मुद्रांक विकत घेणाऱ्याचे नाव - Dr. Sukumar J. Magdum Foundations Hospital, Jaysingpur

दुसऱ्या पक्षकतीचे नाव

हस्त अस्तल्यास त्याचे नाव व पत्ता

मुद्रांक शुल्क रकम

मुद्रांक विक्री मॉडेल आहे असे कमी / दिनांक

मुद्रांक विकत घेणाऱ्याचे नाव / दिनांक

परवान्याधारक मुद्रांक विकत घेत नांव, सही व परवान

क्रमांक तसेच मुद्रांक विक्रीचे ठिकाण / पत्ता

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी
त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून
महिष्यात वापरणे बंधनकारक आहे

श्री. शैलेश सुरेश कुलकर्णी

11.1 FEB 2022

श्री. शैलेश सुरेश कुलकर्णी

२११, गल्ली नं. ३, प्लॉक नं. ६६/६७, जयसिंगपूर, त. शिरोळ
दि. १७/०३/२००३-०४ / Code - 261207

Memorandum of Understanding

Date: 15/02/2022

Between,

1. Dr. Shrivardhan Patil, MD (Radiologist)

And

2. Late Mrs. Housabai Homoeopathic Medical College & Hospital,
Nimshirgaon.

Represented by Dr. Mrs. Shubhangi S. Magdum.
Principal Late. Mrs. Housabai Homoeopathic Medical College & Hospital,
Nimshirgaon. Tal-Shirol, Dist-Kolhapur and shall include In Lawful
representative & permitted assigns

Purpose – The purpose of this MOU is to support Radiological Services,
Ultrasonography of the patient of Late. Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon. Also to give Medical Knowledge to
Students of college for next five years.

Signed by



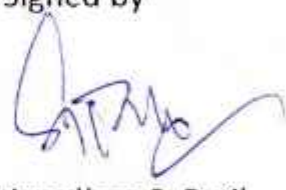
Mrs. Shubhangi S. Magdum

Late. Mrs. Housabai Homoeopathic Medical College
& Hospital

Principal



Signed by



Dr. Shrivardhan S. Patil

MD (Radiology)
Dr. Shrivardhan S. Patil
MDC (Radiology)
Reg No. 68288
Priyadarshini Diagnostic Center, Jaysingpur



The parties hereto agree as follows –

- 1) Dr. Satishkumar Adagonda Patil is running multispecialty Hospital vide named Pios Medilinks Pvt. Ltd., at Jaysingpur-Sangli Road, Jaysingpur, Tal- Shirol, Dist.- Kolhapur, where they treat the patient from multispecialty like Ophthalmology, Medical surgical and Gynaecology/ obstetrics. Late Mrs. Housabai Homoeopathic Medical College & Hospital is also running Hospital in Nimshirgaon at college site, Tal- Shirol, Dist.- Kolhapur.
- 2) Hereby both parties are agree to attach Pios Medilinks Pvt. Ltd., Jaysingpur, Jaysingpur-Sangli Road, Jaysingpur, Tal- Shirol, Dist.- Kolhapur to Medical College for learning purpose of Medical Students. This MoU will be for 5 years i.e. 01/01/2024 to 31/12/2029. If required this MoU can be extended or if college Hospital develop and there is no need the, Party B can give 1 month notice to Party A and this MoU can be terminated.
- 3) Responsibility of transport and teaching will be of Party B.
- 4) Party A has to make arrangement of place for teaching.



Party A

Dr. Satishkumar Adagonda Patil
M.S.(Ortho) M.N.A.M.S., D.N.B. (Ortho)
Consultant Orthopaedic Surgeon,
Pios Medilinks Pvt. Ltd.,
Jaysingpur

Satishkumar A. Patil
PIOS MEDILINKS PVT. LTD.
Near S.T. Station, Jaysingpur.
Ph.: (02322) 226673/74
Reg. No. 109957



Party B

Dr. Mrs. Shubhangi Sakumar Magdum
M.D.HOM.
Late Mrs. Housabai Homoeopathic
Medical College & Hospital,
Nimshirgaon.

Dr. Mrs. Shubhangi S. Magdum
Principal
Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon

भारतीय गैर न्यायिक

एक सौ रुपये

Rs. 100

रु. 100



ONE
HUNDRED RUPEES

सत्यमेव जयते

भारत INDIA

INDIA NON JUDICIAL

महाराष्ट्र MAHARASHTRA

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41AA 445461

वस्तु प्रकार/अनुच्छेद क्रमांक प्रतिस्फुटन (कोरि उक्ती)

वस्तु नोंदणी करणार आहेत का? होय/नाही

नोंदणी होणार असल्यास दुय्यम निबंधक कार्यालयाचे नांव

मुद्रांक विक्रेत्याचे नाव - सौ. विद्या सुकुमार कन्यापा, रा. जयसिंगपूर

कोड नं. 26/92023/4/23/9998 ठिकाना - प्लॉट नं. 33 कावेंत दौ. सोला. जयसिंगपूर

मुद्रांक विक्री अ.क्र. 989C दिनांक :- 9210912023

मुद्रांक शुल्क किंमत रुपये 900/-

मुद्रांक विकत घेणाऱ्याचे नाव - प्रिन्सिपल कै. सौ. होसाबाई होमिओपॅथिक मेडिकल कॉलेज,

दुसऱ्या पक्षकाराचे नाव -

हस्ते असल्यास त्याचे नांव व पत्ता :

मिळकतीचे वर्णन -

पोबंदला रक्कम रुपये -



25 APR 2023

६

SUB-TREASURY OFFICER
SHIROL

निमशिरगाव

मुद्रांक विकत घेणाऱ्याची सह

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी
त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून ६
महिन्यात वापरणे बंधनकारक आहे.

Memorandum of Understanding

Memorandum of Understanding is made on 16/02/2024

Between

Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon (Near Dharmnagar, Sangli - Kolhapur Highway, Ichalkaranji Phata, and Nimshirgaon. Tal-Shirol Dist -Kolhapur.) which is represented by its Chairman here by named as Party A

AND

Asha Bal & Netra Rugnalaya, 14/41/2 Sambhaji Chowk Near D- Mart, Ichalkaranji - 416115. Named as Party B

The parties bear by agree as follows:

1. Asha Bal & Netra Rugnalaya, 14/41/2 Sambhaji Chowk Near D- Mart, Ichalkaranji - 416115 where they treat the patient from Pediatric and Neonatal also having Eye Hospital Having this Hospital is having 50 Beds including ICU, Operation Theaters, OPDs, NICU PICU and separate.
2. Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon (Near Dharmnagar, Sangli Kolhapur Highway, Ichalkaranji Phata, Nimshirgaon Tal- Shirol Dist- Kolhapur-416101, College is Established in 2019 and running BHMS Course are having 50 Beaded Hospital and different OPDs.
3. Here by both parties are agreed to attach Asha Bal & Netra Rugnalaya, 14/41/2 Sambhaji Chowk Near D- Mart, Ichalkaranji -416115 to Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon for learning purpose of Undergraduate Students and Rotatory Internship. This MOU will be for 3years i.e. 16/02/2024 to 17/02/2026 If required this MoU can be extended.
4. Both parties are also agreed to arrange health check up and treatment as social services in collaboration.
5. Responsibility of transport and teaching faculty will be of party A.
6. Party B has to make arrangement of place for teaching and Patients.



Party - A

Dr. Shubhangi S. Magdum
Principal

Late Mrs. Housabai Homoeopathic Medical
College and Hospital, Nimshirgaon

Dr. Mrs. Shubhangi S. Magdum
Principal

Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon



Party - B

Dr. Rahul Chavan

Asha Bal & Netra Rugnalaya
Ichalkaranji

Asha Bal & Netra Rugnalaya

Dr. Rahul S. Chavan

Reg. No. 7000221527



महाराष्ट्र MAHARASHTRA

2023

61AA 639508

दस्तावेज प्रकार/अनुच्छेद क्रमांक

MOU

दस्त नोंदणी करणार आहेत का? होय/नाही

नोंदणी होणार असल्यास दुय्यम निबंधक कार्यालयाचे नाव -

मुद्रांक विक्रेत्याचे नाव :- सौ. दिवा सुकुमार कन्याप्पा रा जयसिंगपूर

कोड नं. 21/22/23/24/25/26/27/28/29/30/31/32/33/34/35/36/37/38/39/40/41/42/43/44/45/46/47/48/49/50/51/52/53/54/55/56/57/58/59/60/61/62/63/64/65/66/67/68/69/70/71/72/73/74/75/76/77/78/79/80/81/82/83/84/85/86/87/88/89/90/91/92/93/94/95/96/97/98/99/100

मुद्रांक शिरी अ.क्र. 44314 दिनांक :- 30/01/2024

मुद्रांक शुल्क किंमत रुपये 100/-

मुद्रांक विकत घेणाऱ्याचे नाव

Late Mrs Housabai Homoeopathic Medical Collage and Hospital, Nimshirgaon

दुसऱ्या पक्षकाराचे नांव Dr. M. L. Dhawale Memorial Homoeopathic Institute, Palghar

हस्ते अस्तित्वास त्याचे नांव व पता : Roshan Himmat Kamble, Kutwad
(Aadhar 9397 3934 7968)

मिळकतीचे वर्णन.

बोवटला रक्कम रुपये :-



09 JAN 2024

SUB-TREASURY OFFICER
SHIROL

v. skurympan
मुद्रांक विक्रेत्याची सही

मुद्रांक विकत घेणाऱ्याची

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्या
त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून
महिश्कार बापटणे बंधनकारक आहे.

MEMORANDUM OF UNDERSTANDING (MoU)

BETWEEN

DR M L DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE

&

Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE ALUMNI ASSOCIATION,
Dhawale Trust Hospital, Palghar Boisar Road, Opp. S.T. Workshop, Pin-401404

&

LATE MRS. HOUSABAI HOMOEOPATHIC MEDICAL COLLEGE AND HOSPITAL
Sangli-Kolhapur Highway, Near Dharmnagar, Nimshirgaon, Tal- Shirol, Dist- Kolhapur 416101.

No. of Corrections
on this Page 11

This MoU is entered into on the 30th Day of January 2024 by and between

Dr. M. L. Dhawale Memorial Homoeopathic Institute
affiliated to Maharashtra University of Health Sciences, Nashik

&

Dr M L Dhawale Memorial Homoeopathic Institute Alumni Association,
Dhawale Trust Hospital, Palghar Boisar Road, Opp. S.T. Workshop, Pin-401404,

&

Late Mrs.Housabai Homoeopathic Medical College and Hospital Sangli-Kolhapur
Highway,near Dharmnagar, Nimshirgaon, Tal- Shirol, Dist- Kolhapur 416101.
Affiliated to Maharashtra University of Health Sciences, Nashik.

The aforesaid Institutes are hereinafter referred to individually as institute and collectively as Institutes.

1) OBJECTIVES OF MEMORANDUM OF UNDERSTANDING:

- a) To promote and enhance cooperation of Academic interest
- b) To provide advice for enhancement of quality of education
- c) To exchange faculty and students between the Institutes for educational, Clinical (Promotive, Preventive and Curative) and Research purposes.
- d) To promote research / continued medical education;
- e) To provide clinical (OPD, IPD) training programme for the intern students of Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon at Dr M. L. Dhawale Memorial Homeopathic Institute and its Alumni Association supported initiatives at
 - 1) Dr M L Dhawale Rural Homoeopathic Hospital, Palghar,
 - 2) Shree Mahalaxmi Hospital, Plot no 269, Shiye-Bawada Road, Hanuman nagar, A/P Shiye, Tal- Karveer, Dist- Kolhapur,
 - 3)Dr Dhawale Homoeopathic Clinic, Nagala Park, Near Vakratund Motors, Kolhapur,
 - 4) Chaitanya Homoeopathic Clinic, Bhaskar Plaza, F-4, First floor, vyapari Peth, Kolhapur
- f) Through mutual help and co-operation strive towards achieving various accreditations.

2) TECHNICAL AREAS OF COLLABORATION:

- a) Provide necessary help and collaborations wherever applicable in organizing conferences/ seminars/ workshops/ and personality development/ life skill programs between Institutes for enhancement of skills in respect of staff and students.
- b) Usage of academic infrastructure of both Institutes by students and faculty members responsibly.
- c) Arranging training programs for students of both Institutes in various required fields
- d) Co-operate in activities such as Placements, Job-Mela programs, etc.

- e) To facilitate training for teachers and students on various identified/ agreed topics.
- f) Guidance for enhancement in infrastructural development of Institutes.
- g) Mutual co-operation between IQACs of both Institutes.

3) PROPOSED MODES OF COLLABORATION:

- a) Co-operation and promotion of education and training in areas of mutual interests.
- b) Creating common platforms for Intellectual exchange of ideas between institutes.

4) TERMS AND CONDITIONS:

- a) For continuing education of teachers and students, the financial arrangements will be made as per the mutually agreed terms.
- b) For the training of interns, the financial arrangement for the travelling and residential rent will be made by students itself.
- c) For the visits related to advice and consultancy, travel, and other expenses of both the faculty and staff shall be reimbursed on mutually agreed terms.
- d) The faculty members and students can use the library facility and exchange the interests for the same.

Usage of academic infrastructure can be allowed for limited period subject to its availability, approval of head of facility/department and Institute norms as well as financial terms

Institutes agree to help, identify, and invite the faculty members and researchers from the other Institute to participate in conferences, workshops and short-term courses and as advisory/organizing committee members.

- g) To provide appropriate discount to staff and students participating in Conferences, Workshops, Seminars, activities, and training programs conducted by either institute.
- h) To give preference to staff and student participants of either institute.
- i) This MoU may be amended, renewed, and terminated by mutual written agreement of the Institutes at any time.
- j) Either institute shall have the right to terminate this MoU upon 60 days prior written notice to the other institute.
- k) On mutual consent of both the Institutes, review meetings will be conducted once in four months with co-coordinators.

5) CONFIDENTIALITY:

- a) The Institutes agree to hold in confidence all information/ data designated by the Institutes as being confidential which is obtained from either Institute or created during the performance of the MoU and will not disclose the same to any third party without written consent of the other Institute.

- b) The above confidential clause under this MoU excludes the information/ data possessed by either Institute before entering the MoU or independently developed and/or information already available through public domain.

6) DURATION OF MOU:

This MoU, unless extended by mutual written consent of the Institutes, shall expire in **Five** year after the effective date specified in the opening paragraph. However, on review, the MoU shall be extended for another **FIVE** year by mutual consent.

7) COORDINATORS:

Institutes will designate two persons each who will have responsibility for co-ordination and implementation of this agreement.

8) INTELLECTUAL PROPERTY RIGHTS:

The Intellectual Property Rights (IPR) that arise as a result of joint research and collaborative activity under the agreement will be worked out on a case to case and will be consistent with officially laid down IPR policies of the two Institute.

9) SIGNED IN DUPLICATE:

This MoU is executed in duplicate with each copy being an official version and having equal validity. By signing below, the Institutes, acting by their duly authorized officers, have caused this Memorandum of Understanding to be executed, effective as of the day and year first above written.

On Behalf of:

DR. BIPIN JAIN

Principal,

Dr M. L. DHAWALE Memorial Homeopathic Institute, Palghar

&

President,

Dr M L Dhawale Memorial Homocopathic Institute Alumni Association, Palghar



DR. SHUBHANGI MAGDUM

Principal

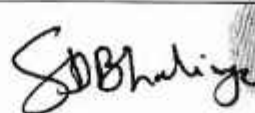



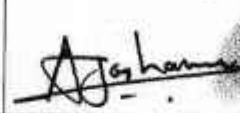



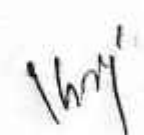

Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon

7

Principal

Late Mrs. Housabai Homoeopathic Medical College and Hospital
Nimshirgaon

Coordinators of the Joint programme:

| | |
|--|---|
| <p>Coordinator from MLDMHIAA Dr Sunil Bhalinge Director, Study groups & Urban Clinics, MLDMHI</p> <p>Dr Vilas Satpute Executive member, MLDMHIAA, Kolhapur Chapter</p> <p>Dr Ajay Hanmane, Coordinator, Kolhapur study group, Kolhapur</p> | <p> </p> <p> </p> <p> </p> |
| <p>Coordinators from Mrs Housabai HMC Coordinator Dr Latta Mallyanwar, In charge, Interns Programme</p> <p>Dr Vidhyadhar Khanaj, Director, Academic</p> | <p> </p> <p> </p> |

Place: Kolhapur

Date: 30/01/2024

Signed Before Me

Shahaji Dattatrya Jagadale
Advocate & Notary Public (Govt. of India)
Reg. No. 5319/2008 Renewed till 05-02-2028
JAYSINGPUR. DIST. KOLHAPUR-416101.

**No. of Corrections
on this Page Nil**

**DOCUMENT
REGISTERED & NOTED
AT SERIAL NO. 115
DATE 30/01/2024**



भारतीय गैर न्यायिक

एक सौ रुपये

Rs. 100

रु. 100

ONE
HUNDRED RUPEES



सत्यमेव जयते

भारत INDIA
INDIA NON JUDICIAL

महाराष्ट्र MAHARASHTRA

2024

12AB 734268

दस्तावा प्रकार/अनुच्छेद क्रमांक :-

अंडरटेकिंग

हस्त नोंदणी करणार आहेत का? होय/नाही

नोंदणी होणार असल्यास दुय्यम निबंधक कार्यालयाचे नांव :-

मुद्रांक विक्रेत्याचे नांव :- कु. गुणाराम बनिचरे, स. जयसिंगपूर

कौड नं. २६९२०२१, प. क्र. २/१९, ठिकाण - नॉट नं. १८ यशवंत हो. सोला, जयसिंगपूर

मुद्रांक विक्री अ.क्र. :- ५९५२ दिनांक :- 14 AUG 2024

मुद्रांक शुल्क किंमत रुपये :- १००/-

मुद्रांक दिकत घेणाऱ्याचे नांव :- श्री. होसाबाई होमिओपॅथिक मेडीकल कॉलेज

दुसऱ्या पक्षकाराचे नांव :- डॉ. होस्पिटल मेडीकल कॉलेज

हस्ते असल्यास त्याचे नांव व पत्ता :-

ड. रोशन ए. कांबळे

मिळकतीचे वर्णन :-

Banichar
मुद्रांक विक्रेत्याची सही

मुद्रांक दिकत घेणाऱ्याची सही

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी
व्यक्त कारणासाठी मुद्रांक खरेदी केल्यापासून हे
अडिग्यात वापरणे बंधनकारक आहे.

पोस्टला रक्कम रुपये :-

Memorandum of Understanding

Memorandum of Understanding is made on 14/08/2024
Between

Late Mrs. Housabai Homoeopathic Medical College & Hospital, Nimshirgaon, (Near
Dharmnagar, Sangli-Kolhapur Highway, Ichalkaranji Phata, Nimshirgaon, Tal-Shirol
Dist -Kolhapur-416101 which is represented by its Chairman here by named as Party A

AND

Samarth Neuro & Super Specialty Hospital Near Bharti Hospital, Sangli- Miraj
Road Sangli - 416410 represented by Dr. Ravidra R. Patil named as Party B

The parties here by agree as follows:

1. **Samarth Neuro & Super Specialty Hospital Near Bharti Hospital, Sangli- Miraj Road Sangli - 416410** where they treat the patient from Super Specialty like Medical, Surgical, Orthopedic, Having 77 Beds including MICU- 13 beds, SICU- 13, HDU- 07, Privet Room- 09 M- Ward -10, F- Ward- 10, SSR-06, Casualty -04, Positive IR -02, Negative IR -01 & OT Recovery -02. **Late Mrs. Housabai Homoeopathic Medical College & Hospital, Nimshirgaon**(Near Dharmnagar, Sangli-Kolhapur Highway, Ichalkaranji Phata, Nimshirgaon.Tal-Shirol Dist -Kolhapur-416101.
2. Here by both parties are agreed to attach **Samarth Neuro & Super Specialty Hospital Near Bharti Hospital, Sangli- Miraj Road Sangli - 416410** to Medical College for learning purpose of Medical Students. this MOU will be for 5years i.e. 14/08/2024 to 15/08/2029 If required this MoU can be extended or if college Hospital Develop and there is no need then party A can give 1 month notice to party B and this MoU can be terminated.
3. Responsibility of transport and teaching will be of party A.
4. Party B has to make arrangement of place for teaching.



Party - A

Dr. Mrs. Shubhangi S. Magdum
Principal

Late Mrs. Housabai Homoeopathic Medical
College & Hospital, Nimshirgaon

Dr. Mrs. Shubhangi S. Magdum
Principal

Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon



Party - B

Dr. Ravindra R. Patil

Samarth Neuro & Super Specialty Hospital
Sangli

DR. RAVINDRA R. PATIL
MBBS, MS, MCH (Neurosurgery)
Reg.No.: 2007/05/1368





महाराष्ट्र MAHARASHTRA

2023

86AA 942913



22 MAR 2024

SUB-TREASURY OFFICER
SHIROL

प्रकार/वस्तु/उद्देश क्रमांक

नोटणी करणार आहेत का? होय/नाही

ही होणार असल्यास दुय्यम विबंधक कार्यालयाचे नांव :-

विक्रय नांव :- शंभूजी श्रीधर शिंदे, रा. दानोळी

दिनांक 28 MAR 2024

विक्री अ.क्र. 900

किंमत रुपये 900

विकत घेणाऱ्याचे नांव :-

न्यायकाराचे नांव :-

असल्यास त्याचे नांव व पत्ता :-

विक्रीचे वर्णन :-

विक्री करणारा

Late Mrs. Hausabai Homoeopathic
Medical College and Hospital, Nimshirgaon

मुद्रांक विक्रयाची सही मुद्रांक विकत घेणाऱ्याची सही

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी
त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून ६
महिण्यात वापरणे बंधनकारक आहे.

Memorandum of Understanding

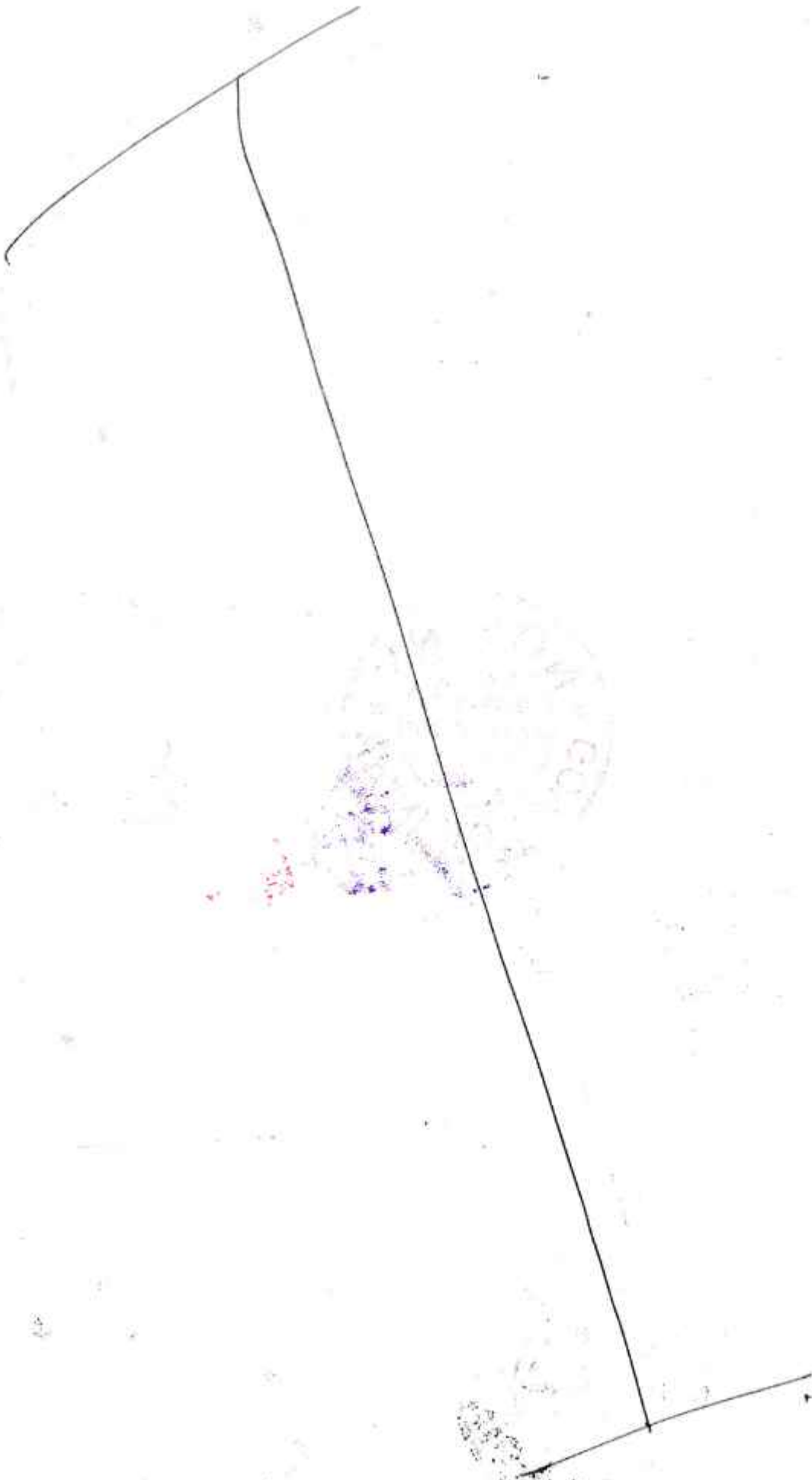
Memorandum of Understanding is made on 05/04/2024
Between

Late Mrs. Housabai Homoeopathic Medical College & Hospital Nimshirgaon (Near
Dharmnagar, Sangli - Kolhapur Highway, Ichalkaranji Phata, Nimshirgaon, Tal- Shirol
Dist - Kolhapur.) which is represented by its Principal here by named as Party A.

AND

Sarvhit Hospital and Medical Research Center (532 A-1, South Shivaji Nagar, Near
Trikoni Baug, Beside Pudhari Bhavan, Sangli- 416 416. Represented by Dr. Mahesh
Fulchand Shah Named as Party B

No. of Corrections
on this page 111





The parties hear by agree as follows:

1. Sarvhit Hospital and Medical Research Center (532 A-1, South Shivaji Nagar, Near Trikon Baug, Beside Pudhari Bhavan, Sangli- 416 416, where they treat the patient from General Medicine and Neurology 108 Beds. Late Mrs .Housabai Homoeopathic Medical College & Hospital Nimshirgaonis also running hospital in Nimshirgaon at College site Tal- Shirol Dist -Kolhapur,

2. Here by both parties are agreed to attach Sarvhit Hospital and Medical Research Center 532 A-1, South Shivaji Nagar, Near Trikon Baug, Beside Pudhari Bhavan, Sangli- 416 416. Represented by Dr. Mahesh Fulchand Shah to Medical College for learning purpose of Medical Students. this MOU will be for 5years i.e. 05/04/2024 to 06/04/2029. If required this MoU can be extended or if college Hospital Develop and there is no need then party A can give 1 month notice to party B and this MoU can be terminated.

3. Party B has to make arrangement of place for teaching.



Party - A
Dr. Shubhangi S. Magdum
Principal

Late Mrs Housabai HMC, Nimshirgaon

Dr. Mrs. Shubhangi S. Magdum

Principal

Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon



Party - B
Dr. Mahesh F. Shah
Director

Sarvhit Hospital and MRC, Sangli.

Signed Before me

Khade Supriya Vipin

Advocate & Notary Public (Govt. of India)

Reg. No. 15801 / 06-12-2019 Valid up to 05-12-2024

JAYSINGPUR, DIST. KOLHAPUR-416101

**No. of Corrections
on this page** 4/11

**REGISTERD & NOTED
AT SERIAL NO. 356**

DATE 22/5 / 2024



Dr. Sukumar J. Magdum Foundation's, Jaysingpur



LATE MRS. HOUSABAI HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL, NIMSHIRGAON.

Sangli-Kolhapur Highway, Ichalkaranji Phata, Near Dharmnagar, Tal.- Shirol,
Dist.- Kolhapur- 416 101 (Maharashtra)

■ Email:- hhmc.20@gmail.com ■ Website:-www.hhmc.co.in

■ Tel. & Fax No.:- (02322) 295503 Office No. : 8446149667, Mob. No.:- 9422582621 / 9422421294

Approved by Ayush New Delhi, NCH New Delhi, Maharashtra State Govt. & Affiliated to MUHS Nashik

Academic Year - 2024-2025

9) First Aid Kit in OPD IPD - Yes Available



[Signature]
Dr. Mrs. Sushilangi S. Magdum
Principal
Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon



Maharashtra Pollution Control Board
महाराष्ट्र प्रदूषण नियंत्रण बोर्ड

S S Services, Ichalkaranji

S.NO. 638, C.S. NO. 17695, STP Compound, Near Sangali Naka,
Takawade Road, Ichalkaranji, Dist. Kolhapur - 416115

Emergency Mobile No. : 8822997711

e-mail:- sswarkhane7711@gmail.com



Unique Registration No.: 555/2023/00916



Offline QR Code

Registration Certificate



Online QR Code

Outward No.: SSS /2024/0196

Date: 18-05-2024

This is to certify that, **Late Mrs. Housabai Homoeopathic Medical College & Hospital & Anatomy Lab, at A/P. Nimshirgaon, Tal. Shirol, Dist. Kolhapur., Nimshirgaon, Maharashtra 416101** is registered with **M/s. S S Services, Ichalkaranji, Ichalkaranji** for Management of Bio Medical Waste in accordance with, the provision of Bio Medical Waste Management Rules, 2016, as amended and in compliance with the provisions of CPCB guidelines.

- | | |
|--|--|
| 1 Authorized Person of HCE (Name and Designation) | : Dr. Magdum Shubhangi Sukumar The Medical Superintendent |
| 2 Bombay Nursing Home Act Registration Details | |
| a. BNH Registration Number | : 478/2021/Jaysingpur |
| b. BNH Issue Date | : 09-08-2021 |
| c. Total Number of Beds | : 25 Beds |
| d. BNH Validity (Form 'C') | : 31-03-2024 |
| 3 Common Treatment Facility Registration Details | |
| a. Date of Registration | : 01-04-2013 |
| b. No. of Beds Registered | : 50 Beds |
| c. Registration Validity | : 31-03-2025 |
| 4 Renewal of CTF Membership (if Applicable) | |
| a. Renewal Date | : 01-04-2025 |
| b. No. of Beds | : 50 Beds |
| 5 MPCB Consent (Establish/ 1st Operate/ Renewal) Details | |
| a. Consent / CCA Number | : SRO-KOLHAPUR/2104000586/21 |
| b. Issue Date | : 28-04-2021 |
| c. Validity up to | : 31-10-2025 |



Authorized Signature

Name : Kishor Pawar/Abhaykumar Birnale
Designation : Partner

Note: HCE shall display copy of Registration Certificate at Front Desk and Temporary BMW Storage area.



Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

Application for Consent/ Authorisation

Sir,
I/We hereby apply for*

1. Consent to Establish/Operate/Renewal of consent under section 25 and 26 of the Water (Prevention & Control of Pollution) Act, 1974 as amended.
2. Consent to Establish/Operate/Renewal of consent under Section 21 of the Air (Prevention and Control of Pollution) Act, 1981, as amended.
3. Authorization/renewal of authorization under Bio-Medical Wastes Management Rules, 2016 as amended, Hazardous waste (M,& TM)n Rules, 2016, in connection with my/our/existing/proposed activity from the premises as per the details given below.

1. General Information

UAN No:
MPCB-CONSENT-0000217579

Application submitted on:
04-12-2024

Industry Information

| | | |
|--|------------------|---------------|
| Industry Type: | Category: | Scale: |
| 088 Health-care Establishment (as defined in BMW Rules) | Orange | S.S.I |

| | |
|--------------------|-------------------|
| Consent To: | Submit to: |
| Operate | SRO - Kolhapur |

Particulars of Applicant (Owner/Occupier/Any other Authorised Person)

| | | | |
|-------------------|---|--------------------------------------|--------------------|
| First Name | Father / Husband Name | Last Name | Designation |
| Dr SHUBHANGI | SUKUMAR | MAGDUM | PRINCIPAL |
| Mobile No | Telephone/Fax | Email | Aadhar No |
| 9422582621 | | hmmedicalcollege@gmail.com@gmail.com | 313852242843 |
| PAN No | Address | Pin Code | |
| APLPM3621B | LATE MRS. HOUSABAI HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL, NIMSHAIGAON, TAL SHIROL, DIST KOLHAPUR | 416101 | |

2. Health Care Facility (HCF) Information

a) Name of the Health Care Facility

LATE MRS. HOUSABAI HOMOEOPATHIC MEDICAL COLLEGE
& HOSPITAL, NIMSHIRGAON, TAL SHIROL, DIST KOLHAPUR

b) Address for Correspondance

| | | |
|-----------------------|---|--------------------|
| <i>Pin Code</i> | <i>District</i> | <i>City/Town</i> |
| 416101 | Kolhapur | SHIROL |
| <i>Survey/Gut No.</i> | <i>Name of premises /Building</i> | <i>Road/Street</i> |
| 87 | LATE MRS. HOUSABAI HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL, NIMSHIRGAON, TAL KAGAL, DIST KOLHAPUR | NIMSHIRGAON |

| | | |
|----------------------|--------------------------------------|--------------------|
| <i>Area/Locality</i> | <i>Email</i> | <i>Website URL</i> |
| NIMSHIRGAON | hmmedicalcollege@gmail.com@gmail.com | na |

c) Details of Contact Person

| | | | |
|-----------------------------------|--------------------|---------------------|--------------------|
| <i>Name of the contact person</i> | <i>Contact No.</i> | <i>Email</i> | <i>Designation</i> |
| MR SANDIP PATIL | 9270114328 | educon121@gmail.com | NA |

d) Onwership of Facility

Private (Ownership under trust)

e) Month and year of commissioning of the HCF

15/01/2024

f) Area of the Facility / Hospital

| | | |
|---|--|-------------------------------------|
| <i>i) Total plot area (in square meter)</i> | <i>ii) Built up area (in square meter)</i> | <i>iii) Open Plot Area (Sq.Mtr)</i> |
| 610.1 | 1429.65 | 30.00 |

g) Enter Latitude and Longitude of site (In degrees)

| | |
|------------------------------|-------------------------------|
| <i>Latitude (In degrees)</i> | <i>Longitude (In degrees)</i> |
| 0 | 0 |

h) Gross capital investment of the HCF/CBWTF without depreciation till the date of application (Cost of building, land, plant and machinery). (To be supported by certificate from Chartered Accountant / Balance sheet)

CA Certificate

| Sr. No. | Fixed Assets | Amount (in lakh) |
|---------|---|------------------|
| 1 | Land | 10.5000 |
| 2 | Building / Premises | 20.2500 |
| 3 | Plant & Machinery / Equipment | 25.2000 |
| 4 | Furniture / Fixture | 15.7500 |
| 5 | Any other movable / immovable fixed assets (Please specify) | |
| 5.a | OTHER ASSETS | 5.7500 |
| 5.b | NA | 0.0000 |
| 5.c | NA | 0.0000 |
| 5.d | NA | 0.0000 |
| 5.e | NA | 0.0000 |
| 6 | Capital Work in Progress (if any) | 0.0000 |

| | |
|--------------------------------|-------------------------|
| <i>Gross Capital (in Lakh)</i> | <i>Certificate Date</i> |
| 77.45 (Lakh) | 18-10-2024 |

i) Compliance of Location Criteria

| | | | |
|--|---|----------------------|-----------------------|
| Location of facility | Whether it is notified industrial area | Land Use Type | Land Ownership |
| Rural | No | Agriculture | Self Owned |
| j) Does HCF have Laundry facility in premises | | No | |
| k) Does HCF have Canteen/Cafeteria facility in premises | | No | |
| l) Does HCF have Hostel/Residential quarters in premises | | No | |
| m) Number of Patient Treated per Day | | | |

| | |
|-------------------------------------|---|
| OPD (Average Patient / Day) | IPD / Admitted (Average Patient / Day) |
| 100 | 10 |

n) Name of the local body under whose jurisdiction the HCF is located.

ULB Type

Grampanchayat

ULB Name

o) Details of the planning permission obtained from the local body/Town and Country Planning authority/Metropolitan Development authority/ designated Authority

| | |
|---------------------------|----------------------------|
| Planning Authority | Planning permission |
| ZP | Occupancy Certificate |

3.BMW Authorization Details

a) Discipline of Medicine

Medicine,Dental,Ayurved

b) Bombay Nursing Home Registration Details

| | | | |
|-----------------------------|--------------------------------|-------------------|--------------------------|
| Total number of Beds | BNH Registration Number | Valid Upto | First Issued Date |
| 75 | 123 | 19-10-2024 | 19-07-2024 |

Certificate issuing Authority
District Health Officer

Total Bed Break up

| | | | | | |
|---------------------|----------------------|-----------------------|--------------------------|----------------------|-------------------|
| General Beds | ICCU/ICU Beds | Maternity Beds | Operation Theatre | Oncology Beds | Other Beds |
| 260 | 4 | 30 | 0 | 0 | 6 |

c) Diagnostic and Pharma Facilities available in Premises

| | | |
|---------------------------------|-----|-------------------------------|
| Pathology Lab | Yes | |
| Blood Bank | No | |
| X-Ray | Yes | X-Ray Number Per Day |
| CT Scan | No | CT Scan Number Per Day |
| MRI | No | MRI Number Per Day |
| USG | Yes | |
| ECG/EEG | No | |
| Medical Store / Pharmacy | No | |
| Other | No | |

| |
|--------------------------------|
| Details of Storage at Facility |
|--------------------------------|

| Sr No | Type | Category | Temporary Storage Area | | | Avg. No. of Bag/Container (Per Day) |
|-------|---------------|----------|------------------------|------------|-------------|-------------------------------------|
| | | | Length (Ft) | Width (Ft) | Height (Ft) | |
| 1 | Untreated BMW | Yellow | 5.00 | 5.00 | 5.00 | 2.00 |
| | | Red | 5.00 | 5.00 | 5.00 | 2.00 |
| | | Blue | 5.00 | 5.00 | 5.00 | 2.00 |
| | | White | 5.00 | 5.00 | 5.00 | 2.00 |

4. Consent Details

a) Sources of Water

- i) Surface Water
- No
- ii) Ground Water
- No
- iii) Tanker Water
- Yes

Quantity of water (CMD)

04

Source of tanker water (Surface,Borewell etc.)

SURFACE

b) Water Consumption Details

Raw Water (CMD)

04

Recycle Water (CMD)

00

Total Water Quantity Requirement (CMD)

04

c) Water consumption for different uses (CMD)

| Purpose | Consumption | Effluent Generation | Treatment | Disposal |
|--|-------------|---------------------|-----------|-----------------------|
| Domestic Pourpose | 02 | 02 | STP | On Land For Gardening |
| Processing whereby water gets Polluted & Pollutants are Biodegradable | 01 | 01 | ETP | On Land For Gardening |
| Processing whereby Water gets Polluted,Pollutants are not Biodegradable &Toxic | 01 | 01 | ETP | On Land For Gardening |
| Industrial Cooling,spraying in mine pits or boiler feed | 0 | 0 | ETP | On Land For Gardening |
| Total | 4.00 | 4.00 | | |

d) Waste Waster Treatement

Have you installed STP or ETP

No

e) Other waste generation details

- 1) Municipal Solid Waste
- a) Biodegradable Waste(kg/day)
- 6.00
- b) Recyclable Waste(kg/day)
- 4.00
- c) Domestic Hazardous Waste(kg/day)
- 1.00
- 2) E-Waste (Kg/Annum)
- 5.00
- 3) Plastic Waste (Kg/Annum)
- 5.00
- 4) Hazardous Waste (Kg/Annum)
- 4.00

Air Pollution

Whether D.G. Set Installed

No

| | | | | | | |
|---------------|------|-----------|----------|------|-----------------------|---------------------------------------|
| Capacity(KVA) | Make | Fuel Used | Fuel QTY | Unit | Stack Height in meter | Accoustic Enclosure for noise control |
|---------------|------|-----------|----------|------|-----------------------|---------------------------------------|

Do you have Boiler Installed

No

[Boiler Details](#)

| <i>Make</i> | <i>Model</i> | <i>Combustion efficiency</i> | <i>Fuel Type</i> | <i>Qty</i> | <i>Shape (round/rectangular</i> | |
|-------------|--------------|------------------------------|------------------|------------|---------------------------------|--|
|-------------|--------------|------------------------------|------------------|------------|---------------------------------|--|

5. Additional Information

Do you have Bio Medical Waste Management Committee Constituted

YES

Do you have Infection Control Committee Constituted

YES



कोल्हापूर महानगरपालिका

पोस्ट बॉक्स नं. ३३, पिन कोड नं. - ४१६ ००२.
फोन नं.-पी.बी.एक्स. बोर्ड २५४०२९१ ते २५४०२९८



जावक क्र.- अग्निशमन विभाग / वशि-१/६५६ /२०२४-२५

दि.: २९/११/२०२४

प्रति,
लेट हौसाबाई होमियोपती मेडीकल
कॉलेज व हॉस्पिटल निमशिरगाव,
गट नं. पार्ट ६०७, निमशिरगाव,
ता- शिरोळ, जि. कोल्हापूर.



विषय :- गट नं. पार्ट ६०७, निमशिरगाव, ता- शिरोळ, जि. कोल्हापूर., (लेट हौसाबाई होमियोपती मेडीकल
कॉलेज व हॉस्पिटल निमशिरगाव) यांचे ७५ बेंड साठी अग्निशमन विभागाचा ना-हरकत दाखला
बाबत...

संदर्भ :- १. संचालक, महाराष्ट्र अग्निशमन सेवा संचालनालय यांचा आदेश दि. २७/०१/२०२१

२. वरद फायर अॅण्ड सेफ्टी सर्वीसेस यांचा दि. २८/११/२०२४ चा B फॉर्म लायसन

नं. MFS- LA/RF- 259/RD-239

उपरोक्त विषयांकीत कामी संदर्भित पत्रान्वये:- गट नं. पार्ट ६०७, निमशिरगाव, ता- शिरोळ, जि. कोल्हापूर., (लेट
हौसाबाई होमियोपती मेडीकल कॉलेज व हॉस्पिटल निमशिरगाव) मध्ये बसविणेत आलेल्या अग्निप्रतिबंध सुविधा दुरुस्त आणि
कार्यक्षम स्थितीत असलेबाबत अग्निशमन विभागाचा ना-हरकत दाखला मागणी केलेला आहे.

उपरोक्त ठिकाणी संचालक, महाराष्ट्र राज्य अग्निशमन सेवा संचालनालय यांनी दिलेल्या आदेशाने महाराष्ट्र आग
प्रतिबंधक व जीव संरक्षक उपाययोजना २००६ भाग ४ नुसार आपल्या हॉस्पिटल मध्ये बसवण्यात आलेली अग्निशमन सुविधाची
कोल्हापूर महानगरपालिका अग्निशमन विभागाने रोजी तपासणी केली वरद फायर अॅण्ड सेफ्टी सर्वीसेस यांचा दि.
२८/११/२०२४ चा B फॉर्म लायसन नं. MFS- LA/RF- 259/RD-239 नुसार १.), ए.बी.सी.. (६केंजी)- १०, २) ३ एच
पि (बुस्टर पंप)-०१ नग, ३) होजरील नोझल सह- ०४ नग., ४) होज बॉक्स, नोझल- ०२ नग, ५) स्मोक डिटेक्टर- २० नग,
६) फायर इनलेट (दुव्हे)- ०१ नग. ७) सिंगल झोन अलार्म पॅनल ही फायर सिस्टीम बसवलेली आहे सदर यंत्रणा आज मितीला
कार्यक्षम व सुस्थितीत असले बाबत नमुद केले असल्याने त्यांना इकडील विभागा कडून ना-हरकत दाखला देण्यात येत आहे.
सदरचा दाखला हा केवळ मुंबई शुश्रूषा गृह नोंदणी साठी वापरण्याचा आहे.

महाराष्ट्र आग प्रतिबंधक व जीव संरक्षक उपाययोजना २००६ भाग ४ मधील कलम ३ (पोट कलम ३) नुसार
सदरची यंत्रणा सुस्थितीत व कार्यरत असले बाबत मान्यताप्राप्त लायसन एजन्सी यांचा B फॉर्म वर्षातून दोन वेळा म्हणजे
जानेवारी व जुलै महिन्यात सादर करण्याचा आहे अन्यथा सदरचा ना-हरकत दाखला रद्द समजण्यात येईल. सदरचा दाखला
एक वर्षाचे मुदतीकरीता देण्यात येत आहे ७५ बेंड हॉस्पिटल परवाना कामी आग सुरक्षा निधी GD2002133202407343
रक्कम ३०२५/- रुपये दिनांक २८/११/२०२४ रोजी भरण्यात आले आहे.

HHMC, Nimshirgaon

Inward No.- 225

Date - 18/12/24

M. Rabb

मुख्य अग्निशमन अधिकारी
कोल्हापूर महानगरपालिका

Dr. Sukumar J. Magdum Foundation's, Jaysingpur



LATE MRS. HOUSABAI HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL, NIMSHIRGAON.

Sangli-Kolhapur Highway, Ichalkaranji Phata, Near Dharmnagar, Tal.- Shirol,

Dist.- Kolhapur- 416 101 (Maharashtra)

■ Email:- hhmc.20@gmail.com ■ Website:-www.hhmc.co.in


■ Tel. & Fax No.:- (02322) 295503 Office No. : 8446149667, Mob. No.:- 9422582621 / 9422421294

Approved by Ayush New Delhi, NCH New Delhi, Maharashtra State Govt. & Affiliated to MUHS Nashik

Academic Year - 2024-2025

13) Emergency Unit - Yes Available




Dr. Mrs. Shubhangi S. Magdum
Principal

Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon



FORM R.S. II
[Rule 5(1)(b)]

Licence No.97/2017-18.

Lincence for the possession and use of rectified spirit including absolute alcohol for industrial, medicinal, scientific and educational purposes.

Lincence is hereby granted, under and subject to the Bombay Prohibition Act, 1946 (Bom.XXV of 1949), and the rules, regulations and orders made thereunder, to Chairman, Housabai Homeopathic Medical college and Hospital, Nimshirgaon, Tal-Shirol, Dist.-Kolhapur on payment of a fee of Rs 400/- Ch. No.MH005200516201718M Dated.08.09.2017 in advance, authorising him to buy, possess and use rectified spirit including absolute alcohol (hereinafter called "spirit") during the period from /09/2017 to 31/03/2018 at his premises situated at Housabai Homeopathic Medical college and Hospital, Nimshirgaon, Tal-Shirol, Dist.-Kolhapur

(hereinafter referred to as "the licensed premises") subject to the following conditions, namely:-

Conditions

1. The licensee shall not use the spirit for any purpose except for*. College Laboratory
2. (1) The licensee shall not buy spirit except on a requisition countersigned by an Officer of the Prohibition and Excise Department duly authorised in the behalf.
- 60 (2) The licensee shall not buy spirit in any one ^{year} Month during the period of the licence more than 05 B.L. Rectified Spirit.
3. (3) The licensee shall not buy spirit in any one ^{year} Month exceeding ⁵⁰ 05 B.L. Rectified Spirit.
3. The licensee shall not have in his possession more than ⁵⁰ 05 B.L. Rectified Spirit, spirit/gallens / quarts at any one time
4. The licensee shall keep all the spirit received by him in a place in the licensed premises approved by the local Inspector of Prohibition and Excise under lock and key and all issues of spirit from the said place shall be made in the presence of the licensee or a person duly authorised by him in writing in that behalf.
5. (1) The licensee shall maintain such accounts as may be prescribed by the Director of Excise and Prohibition under the Act. The account shall be kept in a bound book, paged and stamped with the seal of the Collector.
- (2) The licensee shall keep, along with the account book, the requisitions and transport passes relating to the spirit received at the licensed premises.
- (3) The licensee shall submit such returns as may be prescribed by the Director of Excise and Prohibition under the Act.
- (4) The licensee shall furnish to the Collector such other information relating to the subject matter of this licence as the Collector may from time to time require.
6. The licensee shall pay to Government such cost of the Prohibition and Excise staff if it is appointed of Excise and Prohibition for supervision over the use of rectified spirit, as may be fixed by the Director.

0248

7. The licensed premises, the spirit kept therein and the account books, requisition and transport passes referred to conditions 5 and this license shall at all times be open to inspection by the Collector, or any Prohibition and Excise or Police Officer not lower in rank than a Sub-Inspector of Prohibition and Excise or Police, as the case may be, or by any other officer empowered under Section 77 (a) of the Bombay Prohibition Act, 1949, who may be deputed or authorised by the Collector or the Superintendent of Prohibition and Excise in this behalf.

8. The accounts, requisitions and transport passes referred to in condition 5 and the licence shall be preserved by the licensee during the whole of the period of this licence.

Granted this 8th day of September 2017.



Chalo
18/9
For Collector Kolhapur



Licence in From RS-II No. 97 /2018 -2020

Licence is renewed for the period for 1/4/2018.....

to 31/3/2020. On the same conditions on payment

of renewal fee Rs. 920..... Paid by E Chalan

No. 342..... Date 21.05/2019

Chalo
For Collector Kolhapur



Licence in From RS-I No. 97 /2020-2021

Licence is renewed for the period for 1/4/2020.....

to 31/3/2021. On the same conditions on payment

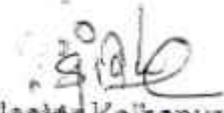
of renewal fee Rs. 425/-..... Paid by E Chalan

No. MH013J3374120A20MD 17/03/2020.

Chalo
For Collector Kolhapur



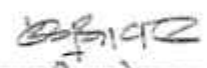
Licence In From 15/03/2021 No. 112021/1570
 Licence is renewed for the period for 1/4/2022
 to 31/3/2023 On the same conditions on payment
 of renewal fee Rs. 425/- Paid by E Chalan
 No. MH014368165202122E Dt. 14/03/2022


 For Collector Kolhapur

क्रमांक - आरटीएस 112021/1570
 कोल्हापूर, दि.14.03.2022

प्रिन्सीपल, होसाबाई होमिओपॅथिक मेडिकल कॉलेज व
 हॉस्पिटल, निमशिरगांव, ता.शिरोळ, जि.कोल्हापूर यांना मंजूर RS
 II क्र. 97/2017-18 या अनुज्ञप्तीच्या अट क्र. 2(2 व 3) मध्ये
 दुरुस्ती करण्याकरिता मा. जिल्हाधिकारी, कोल्हापूर यांनी दि.
 24.02.2022 नुसार मान्यता दिल्याने तसेच सदरबाबत दुरुस्ती
 शुल्क रु. 10/- इंचलन क्र. MH014368165202122E, दि.
 10.03.2022 नुसार शासन जना केल्याने अभिलेखावर तसेच
 मुळ अनुज्ञप्तीवर तशी नोंद घेण्यात येत आहे.




 जिल्हाधिकारी, कोल्हापूर करीता

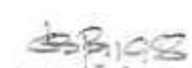
Licence In From RS-A No. 97 /2022-2023
 Licence is renewed for the period for 1/4/2022
 to 31/3/2023 On the same conditions on payment
 of renewal fee Rs. 425/- Paid by E Chalan
 No. MH014368165202122E 17/03/2022




 For Collector Kolhapur

Licence In From RS-II No. 17 /2023-2024
 Licence is renewed for the period for 1/4/2023
 to 31/3/2024 On the same conditions on payment
 of renewal fee Rs. 425/- Paid by E Chalan
 No. MH014368165202122E 31/12/2022




 For Collector Kolhapur



Licence in Form 25-B No. 97 2024-25
Licence is renewed for the period for 1/4/2024
to 31/3/2025 On 8/4 the conditions on payment
of renewal fee Rs. 425/- Paid by E Chikan
No. 11217-654322228-40 Dtd. 1/03 2024

E Chikan
For Collector Kolhapur



LATE MRS. HOUSABAI HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL, NIMSHIRGAON.

Sangli-Kolhapur Highway, Ichalkaranji Phata, Near Dharmnagar, Tal.- Shirol,

Dist.- Kolhapur- 416 101 (Maharashtra)

■ Email:- hhmc.20@gmail.com ■ Website:-www.hhmc.co.in

■ Tel. & Fax No.:- (02322) 295503 Office No. : 8446149667, Mob. No.:- 9422582621 / 9422421294

Approved by Ayush New Delhi, NCH New Delhi, Maharashtra State Govt. & Affiliated to MUHS Nashik

| Maharashtra University of Health Sciences, Nashik | | | | | |
|---|--------|-----------------|-------------|----------------------|---------------------------------|
| Homoeopathic Faculty | | | | | |
| Details of the Hospital and Work Record : (Hospital Information) | | | | | |
| Year - 1 Jan 2024 31 Dec 2024 | | | | | |
| Name of the College :- Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon. | | | | | |
| MUHS College Code-142117 | | | | | |
| NUMBER OF PATIENTS ATTENDED OPD | | | | 1Jan to 31 December- | |
| 2024 | | | | | |
| Sr.No | Month | General Medicin | Peadiatrics | Obgy | Surgery or Any other Speciality |
| 01 | Jan. | 2731 | 1075 | 1282 | 1382 |
| 02 | Feb. | 2353 | 983 | 1158 | 1284 |
| 03 | March | 2330 | 1059 | 1209 | 1273 |
| 04 | April | 2495 | 1085 | 1219 | 1296 |
| 05 | May | 2704 | 1126 | 1291 | 1546 |
| 06 | Jun | 2600 | 1043 | 1202 | 1382 |
| 07 | July | 2854 | 1116 | 1233 | 1410 |
| 08 | August | 2774 | 1158 | 1299 | 1546 |
| 09 | Sept. | 2537 | 1303 | 1246 | 1587 |
| 10 | Oct. | 2690 | 1318 | 1334 | 1629 |
| 11 | Nov. | 2673 | 1196 | 1311 | 1567 |
| 12 | Dec. | 2887 | 1177 | 1379 | 1629 |
| Total | | 31628 | 13639 | 15163 | 17531 |
| Grand Total :- 77961 | | | | | |




Principal
Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon



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| Maharashtra University of Health Sciences, Nashik | | | | | |
|---|--------|------------------|------------|------|---------------------------------|
| Homoeopathic Faculty | | | | | |
| Details of the Hospital and Work Record : (Hospital Information) | | | | | |
| Year - 1 Jan 2024 31 Dec 2024 | | | | | |
| Name of the College :- Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon. | | | | | |
| MUHS College Code-142117 | | | | | |
| NUMBER OF PATIENTS ATTENDED IPD | | | | | 1Jan to |
| 31 December-2024 | | | | | |
| Sr.No | Month | General Medicine | Pediatrics | Obgy | Surgery or Any other Speciality |
| 01 | Jan. | 241 | 38 | 48 | 143 |
| 02 | Feb. | 243 | 34 | 56 | 103 |
| 03 | March | 232 | 35 | 24 | 151 |
| 04 | April | 194 | 29 | 29 | 153 |
| 05 | May | 278 | 35 | 79 | 152 |
| 06 | Jun | 160 | 46 | 75 | 167 |
| 07 | July | 256 | 22 | 61 | 151 |
| 08 | August | 365 | 40 | 34 | 114 |
| 09 | Sept. | 379 | 101 | 57 | 141 |
| 10 | Oct. | 421 | 50 | 44 | 212 |
| 11 | Nov. | 360 | 57 | 27 | 171 |
| 12 | Dec. | 303 | 39 | 76 | 288 |
| Total | | 3432 | 526 | 610 | 1946 |
| Grand Total :- 6514 | | | | | |
| Bed Occupancy (%) :- 59.85 | | | | | |




Principal
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Dr. Sukumar J. Magdum Foundation's, Jaysingpur



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Dr. Sukumar J. Magdum Foundation, Jaysingpur.

Late Mrs. Housabai Homoeopathic Medical College & Hospital, Nimshirgaon

LABORATORY ALL TEST DETAILS

1 JAN-2024 TO 31 DEC-2024

| MONTH | HEMATOLOGY | BIOCHEMISTRY | SEROLOGY | MICROBIOLOGY |
|---------------------|-------------------|---------------------|-----------------|---------------------|
| JAN | 296 | 281 | 63 | 62 |
| FEB | 177 | 294 | 79 | 59 |
| MAR | 189 | 367 | 79 | 46 |
| APR | 118 | 423 | 43 | 60 |
| MAY | 170 | 454 | 66 | 42 |
| JUN | 168 | 219 | 42 | 51 |
| JULY | 183 | 309 | 43 | 51 |
| AUG | 236 | 325 | 64 | 49 |
| SEP | 183 | 270 | 69 | 58 |
| OCT | 132 | 210 | 60 | 36 |
| NOV | 171 | 223 | 61 | 55 |
| DEC | 345 | 283 | 42 | 49 |
| Y.TOTAL | 2368 | 3658 | 701 | 607 |
| TOTAL = 7334 | | | | |



[Signature]
Late Mrs. Housabai Homoeopathic Medical College & Hospital, Nimshirgaon



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Maharashtra University of Health Sciences, Nashik

Homoeopathic Faculty

Details of the Hospital and Work Record: (Hospital Information)

Year – 1Jan 2024-31 Dec2024

Name of the College: - Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon.

College Code: - 142117

Total No. of ECG

(1st Jan to 31st December-2024)

| Sr. No. | Month | No. of ECG |
|---------|-----------|------------|
| 01 | January | 21 |
| 02 | February | 19 |
| 03 | March | 14 |
| 04 | April | 13 |
| 05 | May | 18 |
| 06 | Jun | 10 |
| 07 | July | 15 |
| 08 | August | 15 |
| 09 | September | 13 |
| 10 | October | 18 |
| 11 | November | 13 |
| 12 | December | 19 |
| Total | | 188 |



Principal

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Homoeopathic Faculty

Details of the Hospital and Work Record: (Hospital Information)

Year – 1Jan 2024-31 Dec2024

Name of the College: - Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon.

College Code: - 142117

Total No. of USG

(1st Jan to 31st December-2024)

| Sr. No. | Month | No. of USG |
|---------|-----------|------------|
| 01 | January | 11 |
| 02 | February | 6 |
| 03 | March | 4 |
| 04 | April | 14 |
| 05 | May | 11 |
| 06 | Jun | 2 |
| 07 | July | 8 |
| 08 | August | 8 |
| 09 | September | 9 |
| 10 | October | 7 |
| 11 | November | 13 |
| 12 | December | 12 |
| Total | | 105 |



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Maharashtra University of Health Sciences, Nashik

Homoeopathic Faculty

Details of the Hospital and Work Record: (Hospital Information)

Year — – 1Jan 2024-31 Dec2024

Name of the College: - Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon.

College Code: - 142117

Total No. of X-Ray

(1st Jan to 31st December-2024)

| Sr. No. | Month | No. of X-Ray |
|---------|-----------|--------------|
| 01 | January | 78 |
| 02 | February | 69 |
| 03 | March | 87 |
| 04 | April | 75 |
| 05 | May | 75 |
| 06 | Jun | 70 |
| 07 | July | 71 |
| 08 | August | 83 |
| 09 | September | 84 |
| 10 | October | 98 |
| 11 | November | 71 |
| 12 | December | 83 |
| Total | | 944 |




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Maharashtra University of Health Sciences, Nashik

Homoeopathic Faculty

Details of the Hospital and Work Record: (Hospital Information)

Year – 1Jan 2024-31 Dec2024

Name of the College: - Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon.

College Code: - 142117

Total No. of Surgery (OT)

(1st Jan to 31st December-2024)

| Sr. No. | Month | Minor | Major |
|---------|-----------|-------|-------|
| 01 | January | 19 | 5 |
| 02 | February | 16 | 9 |
| 03 | March | 18 | 1 |
| 04 | April | 12 | 8 |
| 05 | May | 12 | 9 |
| 06 | Jun | 7 | 4 |
| 07 | July | 14 | 6 |
| 08 | August | 10 | 1 |
| 09 | September | 12 | 8 |
| 10 | October | 9 | 2 |
| 11 | November | 6 | 7 |
| 12 | December | 9 | 4 |
| Total | | 144 | 64 |



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Maharashtra University of Health Sciences, Nashik

Homoeopathic Faculty

Details of the Hospital and Work Record: (Hospital Information)

Year – 1Jan 2024-31 Dec2024

Name of the College: - Late Mrs. Housabai Homoeopathic Medical College and Hospital, Nimshirgaon.

College Code: -142117

Total No. of Physiotherapy

(1st Jan to 31st December-2024)

| Sr. No. | Month | No. of Physiotherapy |
|---------|-----------|----------------------|
| 01 | January | 201 |
| 02 | February | 186 |
| 03 | March | 179 |
| 04 | April | 171 |
| 05 | May | 344 |
| 06 | Jun | 158 |
| 07 | July | 160 |
| 08 | August | 192 |
| 09 | September | 236 |
| 10 | October | 260 |
| 11 | November | 254 |
| 12 | December | 442 |
| Total | | 2783 |



Principal

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Year - 2024-2025

- 6) Number of Patients in OPD on the day of Inspection –
- 7) Number of patients in IPD on the day of Inspection –
- 8) Average bed occupancy per day during last one calendar year as Per MES:- 59.85
- 9) Minimum per day average number of Patient in outpatient Department during last one calendar year as per MES- 263
- 10) Verify and sign OPD/IPD record at the time of visit under following Headings

1. Central register
2. Departmental Register
3. Case Paper (OPD&IPD)
4. Laboratory and radiological investigation
5. Dispensing Register
6. Diet Register
7. Operation theatre Register
8. Duty Roster / Acquaintance Roll

Available



Dr. Mrs. Shubhangi S. Magdum
Principal
Late Mrs. Housabai Homoeopathic
Medical College & Hospital, Nimshirgaon