

Joint Registrar
Academic Section
Aligarh Muslim University
Aligarh.

Dated:24/01/2017

D. No. 2063 /TBRD

Through: Dean, faculty of Medicine Jawaharlal Nehru Medical College AMU.

Minutes

Of Special meeting of Board of Studies held on 23.01.2017

Following member were present

S. No.	Member	Designation	Department
1.	Prof. Rakesh Bhargava	Professor	Tuberculosis& Respiratory Diseases
2.	Prof. Zuber Ahmad	Professor	Tuberculosis& Respiratory Diseases
3.	Prof. H.S. Khan	Professor	Medicine
4.	Prof. Mohd. Khalid	Professor	Radio diagnosis
5.	Dr. Imrana Masood	Assistant Professor	Tuberculosis& Respiratory Diseases
6.	Dr. Ummul Baneen	Assistant Professor	Tuberculosis& Respiratory Diseases
7.	Dr. Md. Arif Alam	Senior Resident	Tuberculosis& Respiratory Diseases
8.	Dr. Salauddin	Senior Resident	Tuberculosis& Respiratory Diseases
9.	Dr. L. Sailo	Senior Resident	Tuberculosis & Respiratory Diseases
10.	Prof. Mohammad Shameem	Professor & Chairperson	Tuberculosis& Respiratory Diseases

Agenda:-	To discussion the letter D.No.1893/FM dated 13.01.2017 of Dean, Faculty of Medicine regarding master Plan for future expansion of the department
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(Prof. Mohammad Shameem)
Chairperson

ABSTRACT

S. No.	Requirement	Cost
01.	Equipment	210.00 Lacs
02.	Building	105.00 Lacs (Approximate)
03.	Manpower	As per UGC Norms

Total Requirement= 315.00 Lacs + Cost of Manpower

(Prof. Mohammad Shameem)
Chairperson

Equipment

S.No	Equipment	Justification	Cost
1.	Endobronchial Ultrasound (EBUS)	<ul style="list-style-type: none"> ➤ With EBUS mini-probe, the multilayered structure of the tracheobronchial wall can be analyzed better than any other imaging modality. ➤ Instead of fluoroscopic guided biopsy, EBUS can be used to biopsy peripheral lesions. ➤ EBUS-transbronchial needle aspiration has proved valuable for mediastinal lymph node staging of lung cancer. ➤ EBUS is cost-effective as it reduces the need for more morbid and costly invasive procedure like mediastinoscopy or thoracotomy. 	90.0 Lacs
2.	Thoracic Ultrasound (Color)	<ul style="list-style-type: none"> ➤ Can be used at the bedside to detect pleural malignancies and effusions, as well as peripheral lung nodules of the lung, in seriously ill patient. ➤ Ultrasound can used as a real-time bedside clinical tool for clinicians in ICU. ➤ Despite bedside portable chest radiography (CR) being relatively inexpensive, available in most hospital, and able to provide useful information, it has been shown to be inaccurate in many situations and has a few limitations. ➤ The technical limitations of the tool (<i>e.g.</i>, movement during X-ray exposure, breath holding during X-ray exposure, and cassette placed posteriorly in the thorax) may lead to an incorrect assessment of the most frequent pulmonary diseases. ➤ In addition, the time required to achieve bedside ordinary CR and compile a report may retard the diagnosis and extend the patient's stay in the emergency department, thereby contributing to overcrowding of the department. ➤ CR is never helpful for the diagnosis of pneumothorax in patients staying in the intensive care unit (ICU) during non-invasive ventilation. 	20.0 Lacs
3.	Sleep Lab	<ul style="list-style-type: none"> ➤ Sleep deprivation and other sleep disorders can have a serious effect on health. ➤ American Academy of Family Physicians (1999) reports over 50 percent of people 65 years old and older live with the effects of sleep disorders. ➤ People with obstructive sleep apnea have 	30.0 Lacs

		<p>a risk of hypertension, or high blood pressure, that is up to three times higher than normal, according to the Mayo Clinic (2010).</p> <p>➤ Other complications of sleep apnea include an increased risk of diabetes, seizures, headaches and eye disorders such as glaucoma</p>	
4.	Rigid bronchoscope, Fibre optic Bronchoscope, Cryo biopsy equipment.	Required to do interventional procedures like de bulking of tumor, taking biopsy etc	70.0 lacs

TOTAL COST OF EQUIPMENTS: 210.00 Lacs

(Prof. Mohammad Shameem)
Chairperson

BUILDING

S.No		Justification	Area
1.	i) Tuberculosis Ward ii) Separate ward for female	<ul style="list-style-type: none"> ➤ Do not have separate Tuberculosis ward. ➤ Immuno compromised patients like Lung Cancer, HIV and patient on long term steroid should have separate ward. ➤ Separate ward for female not available 	<ul style="list-style-type: none"> ➤ 7000 sq feet ➤ Space available adjacent to ward no 13.
2.	Extension of departmental building	<ul style="list-style-type: none"> ➤ Do not have PG LABS for research. ➤ Chambers for Faculties 	<ul style="list-style-type: none"> ➤ 2275 sq feet ➤ Space available over roof.

Total Cost of Building – 105.00 Lacs (Approximate)

(Prof. Mohammad Shameem)
Chairperson

Manpower:

S. No	Manpower required	Justification
1.	<i>TWO MEDICAL OFFICERS (FOR RESPIRATORY ICU)</i>	<ul style="list-style-type: none"> ➤ NOW WE ARE RUNNING ICU WHICH REQUIRES 24X7 MONITORING OF THE PATIENT. ➤ ONLY TWO PG SELECTED PER YEAR WHICH IS NOT SUFFICIENT TO CATER HEAVY PATIENT LOAD.
2.	I) <i>Upper Division Clerk (one)</i> II) <i>Lower Divisional Clerk (one)</i>	<ul style="list-style-type: none"> ➤ NO CLERKICAL POST IN THE DEPARTMENT.
3.	<i>Accountant (one)</i>	<ul style="list-style-type: none"> ➤ NO ACCOUNTANT IN THE DEPARTMENT
4.	<i>STORE KEEPER(one)</i>	<ul style="list-style-type: none"> ➤ NO STORE KEEPER IN THE DEPARTMENT
5.	<i>SLEEP TECHNICIAN</i>	<ul style="list-style-type: none"> ➤ ESSENTIALLY REQUIRED FOR POLYSOMNOGRAPHY LAB.

(Prof. Mohammad Shameem)
Chairperson

